

**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

TEA PARTY PATRIOTS CITIZENS FUND

ADDRESS (number and street) 2295 TOWNE LAKE PKWY STE 116-328

Check if different than previously reported. (ACC) WOODSTOCK GA 30189

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

C C00540898 3. IS THIS REPORT  NEW (N) OR  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)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)
  - Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)
  - Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

- (c) 12-Day  Primary (12P)  General (12G)  Runoff (12R)
- PRE-Election Report for the:  Convention (12C)  Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

- (d) 30-Day  General (30G)  Runoff (30R)  Special (30S)
- POST-Election Report for the:

Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [MM] / [DD] / [YYYY] 04 / 01 / 2014 through [MM] / [DD] / [YYYY] 04 / 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 PAUL A KILGORE

Signature of Treasurer PAUL A KILGORE [Electronically Filed] Date 05 / 20 / 2014

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

Office Use Only							
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**FEC FORM 3X**  
Rev. 12/2004

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

TEA PARTY PATRIOTS CITIZENS FUND

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"/>		1069925.11
(b) Cash on Hand at Beginning of Reporting Period.....	847721.49	
(c) Total Receipts (from Line 19) .....	754937.82	2589306.84
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1602659.31	3659231.95
7. Total Disbursements (from Line 31).....	691155.66	2747728.30
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	911503.65	911503.65
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	56387.54	

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

**TEA PARTY PATRIOTS CITIZENS FUND**

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).....	318610.50	620788.46
(ii) Unitemized .....	436327.32	1958558.59
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	754937.82	2579347.05
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	754937.82	2579347.05
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	9959.79
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	754937.82	2589306.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	754937.82	2589306.84

**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 .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	646161.04	2529624.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	646161.04	2529624.80
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	44994.62	218103.50
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	691155.66	2747728.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	691155.66	2747728.30

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	754937.82	2579347.05
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	754937.82	2579347.05
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	646161.04	2529624.80
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	9959.79
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	646161.04	2519665.01

**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 219
	<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	

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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. HAROLD ALLEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 713 WAKEFIELD

City EL PASO	State TX	Zip Code 79922
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FEC ID number of contributing federal political committee. **C**

Name of Employer MMI	Occupation PRESIDENT
-------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	08	/	2014

**Transaction ID : SA11AI.256240**

Amount of Each Receipt this Period  
250.00

**B. HAROLD ALLEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 713 WAKEFIELD

City EL PASO	State TX	Zip Code 79922
-----------------	-------------	-------------------

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

Name of Employer MMI	Occupation PRESIDENT
-------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	18	/	2014

**Transaction ID : SA11AI.257317**

Amount of Each Receipt this Period  
150.00

**C. MS AGNES ANDERSON**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 160668  
WALTER & AGNES ANDERSON REV TR 198

City SACRAMENTO	State CA	Zip Code 95816
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2014

**Transaction ID : SA11AI.249158**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	900.00
<b>TOTAL</b> 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 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. MS BENNIE B ANDING</b>		Date of Receipt
Mailing Address 2591 GLENDA DR		<input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
ORANGE	TX	77632
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.248507</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="260.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. GEORGE R APP</b>		Date of Receipt
Mailing Address 551 HERMAY DR		<input type="text" value="04"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
HAMILTON	OH	45013
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.256071</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="550.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. DAVID ARBUCKLE</b>		Date of Receipt
Mailing Address 4990 N 550 W		<input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
FAIRLAND	IN	46126
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.248156</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="300.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 219
<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

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. WILLIAM E ARDLE**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2150

City SPRINGFIELD State OH Zip Code 45501

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

Name of Employer SCHNEIDER'S FLORIST Occupation OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2014  
**Transaction ID : SA11AI.246074**

Amount of Each Receipt this Period  
 150.00

**B. MR. ROBERT ARNAUD**  
Full Name (Last, First, Middle Initial)

Mailing Address 58410 LINDSAY LN

City WARREN State OR Zip Code 97053

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2014  
**Transaction ID : SA11AI.247243**

Amount of Each Receipt this Period  
 50.00

**C. MR STEVEN G ATCHESON**  
Full Name (Last, First, Middle Initial)

Mailing Address 4260 HACKAMORE DR

City RENO State NV Zip Code 89519

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 02 / 2014  
**Transaction ID : SA11AI.243718**

Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1200.00
<b>TOTAL</b> 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 9 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MICHAEL AUGUSTINE**  
Full Name (Last, First, Middle Initial)

Mailing Address 1721 ENDICOTT CT.

City VIRGINIA BEACH	State VA	Zip Code 23464
------------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation CPA.
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2014

**Transaction ID : SA11AI.248792**

Amount of Each Receipt this Period  
1000.00

**B. ALLYN BARRETT**  
Full Name (Last, First, Middle Initial)

Mailing Address 3003 OAKHILL DR

City AVON PARK	State FL	Zip Code 33825
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2014

**Transaction ID : SA11AI.251342**

Amount of Each Receipt this Period  
250.00

**C. MRS JUDY A BARRICK**  
Full Name (Last, First, Middle Initial)

Mailing Address 2274 GIRD RD

City FALLBROOK	State CA	Zip Code 92028
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	28	/	2014

**Transaction ID : SA11AI.253279**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> 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 10 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. NORRIS W BARRY**  
Full Name (Last, First, Middle Initial)

Mailing Address 330 FAWNLAKE DR

City HOUSTON State TX Zip Code 77079

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 18 / 2014  
**Transaction ID : SA11AI.247982**

Amount of Each Receipt this Period  
 100.00

**B. WALTER BEAMER**  
Full Name (Last, First, Middle Initial)

Mailing Address 3524 WEST HAMPTON DRIVE

City MARIETTA State GA Zip Code 30064

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 ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2014  
**Transaction ID : SA11AI.258458**

Amount of Each Receipt this Period  
 200.00

**C. ARNOLD BECK**  
Full Name (Last, First, Middle Initial)

Mailing Address 8453 GLENNRIDGE AVE NW

City CLINTON State OH Zip Code 44216

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2014  
**Transaction ID : SA11AI.249711**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> 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 11 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MIRIAM R BENSMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 724 SHADY LAKE PKWY

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 14 / 2014  
**Transaction ID : SA11AI.246550**

Amount of Each Receipt this Period  
100.00

**B. ROBERT A BERNATCHEZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 26 MARK CIR

City State Zip Code  
RUTLAND MA 01543

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
525.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2014  
**Transaction ID : SA11AI.246870**

Amount of Each Receipt this Period  
125.00

**C. MARGARET S BERNHEIM**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 6928

City State Zip Code  
BEND OR 97708

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2014  
**Transaction ID : SA11AI.247240**

Amount of Each Receipt this Period  
80.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 305.00

**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 12 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. DOWLTON M BERRY**

Mailing Address 2372 SUNSET CURV

City UPLAND State CA Zip Code 91784

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 ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2014  
**Transaction ID : SA11AI.249613**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. RICHARD W BLIZZARD**

Mailing Address 1498 HAMMONDS MILL RD.

City HEDGESVILLE State WV Zip Code 25427

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 ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2014  
**Transaction ID : SA11AI.258313**

Amount of Each Receipt this Period  
150.00

Full Name (Last, First, Middle Initial)  
**C. GLEN H BLOMGREN**

Mailing Address 4178 W KELLY AVE

City FRESNO State CA Zip Code 93722

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 ▼  
450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 18 / 2014  
**Transaction ID : SA11AI.247868**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<b>TOTAL</b> 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 13 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. MR JOHN L BLUDWORTH III</b>		Date of Receipt
Mailing Address 21511 HEGAR RD		<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Zip Code
HOCKLEY	TX	77447
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.248931</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10000.00"/>
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="10000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. WAYNE BOBBITT</b>		Date of Receipt
Mailing Address 937 HARWOOD TER		<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code
BEDFORD	TX	76021
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.246508</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="400.00"/>
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. RICHARD BONTKE</b>		Date of Receipt
Mailing Address 913 WALNUT FALLS CIR		<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Zip Code
MANSFIELD	TX	76063
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.249120</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="10650.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 14 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. LYNDON BOZEMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 6543 WOODLAND DR

City DALLAS	State TX	Zip Code 75225
----------------	-------------	-------------------

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 ▼  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 08 / 2014  
**Transaction ID : SA11AI.256159**

Amount of Each Receipt this Period  
150.00

**B. MRS DONNA Q BRADY**  
Full Name (Last, First, Middle Initial)

Mailing Address 12656 N 84TH PL

City SCOTTSDALE	State AZ	Zip Code 85260
--------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 11 / 2014  
**Transaction ID : SA11AI.246399**

Amount of Each Receipt this Period  
250.00

**C. MARLENE BRANNAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1314 BONITA BAHIA

City BENICIA	State CA	Zip Code 94510
-----------------	-------------	-------------------

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 ▼  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 16 / 2014  
**Transaction ID : SA11AI.247597**

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> 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: PAGE 15 OF 219  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. JAMES C BREEDING**

Mailing Address 2090 CLARK AVE

City State Zip Code  
SANTA CLARA CA 95051

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

Name of Employer Occupation  
NORTHROP GRUMMAN ENGINEER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 03 / 2014  
**Transaction ID : SA11AI.244113**

Amount of Each Receipt this Period  
350.00

Full Name (Last, First, Middle Initial)  
**B. JOAN BRENTON**

Mailing Address 4821 EASTHILL DR

City State Zip Code  
ROANOKE VA 24018

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
575.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 08 / 2014  
**Transaction ID : SA11AI.245646**

Amount of Each Receipt this Period  
125.00

Full Name (Last, First, Middle Initial)  
**C. ROBERT J. BRINKMAN**

Mailing Address 1761 SE 7TH ST

City State Zip Code  
FORT LAUDERDALE FL 33316

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 24 / 2014  
**Transaction ID : SA11AI.250030**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1475.00

**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: PAGE 16 OF 219  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MS PATRICIA S BRODERICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 105 QUAIL LN  
 City MOORESVILLE State NC Zip Code 28117  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 21 / 2014  
**Transaction ID : SA11AI.257504**  
 Amount of Each Receipt this Period  
 100.00

**B. MR KRISTIAN BROMMELAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 695 EVANS WAY  
 City THE VILLAGES State FL Zip Code 32162  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 15 / 2014  
**Transaction ID : SA11AI.246894**  
 Amount of Each Receipt this Period  
 250.00

**C. MARTHA ANN BROOKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2307 N BENTON WAY  
 City SANTA ANA State CA Zip Code 92706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 21 / 2014  
**Transaction ID : SA11AI.248114**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00  
**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: PAGE 17 OF 219  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MRS MARIANNE BROOKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3772 E MILLERS BRIDGE RD  
 City TALLAHASSEE State FL Zip Code 32312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 6000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 21 / 2014  
**Transaction ID : SA11AI.248652**  
 Amount of Each Receipt this Period  
 6000.00

**B. JOHN L. BROUILLARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 374 STILSON CANYON RD.  
 City CHICO State CA Zip Code 95928  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 03 / 2014  
**Transaction ID : SA11AI.244261**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. GREGORY L BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 82  
 City PLEASANT GDN State NC Zip Code 27313  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2014  
**Transaction ID : SA11AI.246088**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6150.00  
**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 18 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. GENE K BRUCE**  
Full Name (Last, First, Middle Initial)

Mailing Address 847 PARROTT DR

City SAN MATEO State CA Zip Code 94402

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2014  
**Transaction ID : SA11AI.247835**

Amount of Each Receipt this Period  
 50.00

**B. ELIZABETH MDT BRYDEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1 W 67TH ST APT 611

City NEW YORK State NY Zip Code 10023

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 ▼ 5120.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2014  
**Transaction ID : SA11AI.249604**

Amount of Each Receipt this Period  
 3005.00

**C. CHARLES BURKETT**  
Full Name (Last, First, Middle Initial)

Mailing Address 15502 AMBER HOLLOW LN.

City CYPRESS State TX Zip Code 77429

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 ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 25 / 2014  
**Transaction ID : SA11AI.257823**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3155.00

**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 19 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. RICHARD BURNS**  
Full Name (Last, First, Middle Initial)

Mailing Address 81 MINIVALE RD

City STAMFORD	State CT	Zip Code 06907
------------------	-------------	-------------------

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 ▼  
525.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04		14		2014

**Transaction ID : SA11AI.246474**

Amount of Each Receipt this Period  
75.00

**B. MR FRED M BUTLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1251 COUNTRY CLUB DR

City LAUGHLIN	State NV	Zip Code 89029
------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04		15		2014

**Transaction ID : SA11AI.246999**

Amount of Each Receipt this Period  
300.00

**C. RAYMOND J BUTTSCHAU**  
Full Name (Last, First, Middle Initial)

Mailing Address 8104 HIGHWOOD DR APT G315

City MINNEAPOLIS	State MN	Zip Code 55438
---------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04		14		2014

**Transaction ID : SA11AI.246603**

Amount of Each Receipt this Period  
125.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> 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 20 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JERRY BYRD SR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 2110 T STREET, S.E.

City WASHINGTON State DC Zip Code 20020

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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 09 / 2014  
**Transaction ID : SA11AI.256465**

Amount of Each Receipt this Period  
 250.00

**B. BERNARD W. CAMPBELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 3100 WATERFORD DR.

City FLORENCE State SC Zip Code 29501

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 ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 02 / 2014  
**Transaction ID : SA11AI.243910**

Amount of Each Receipt this Period  
 500.00

**C. SYBIL A CAMPBELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 70 BEECHWOOD AVE

City WATERTOWN State MA Zip Code 02472

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 ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 07 / 2014  
**Transaction ID : SA11AI.245090**

Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<b>TOTAL</b> 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 21 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. SUE M CANNON</b>		Date of Receipt
Mailing Address 6420 W LAKERIDGE RD		<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City LAKEWOOD	State CO	Zip Code 80227
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.246731</b>
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="5000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="5000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. SUE M CANNON</b>		Date of Receipt
Mailing Address 6420 W LAKERIDGE RD		<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City LAKEWOOD	State CO	Zip Code 80227
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.249147</b>
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="5000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="10000.00"/>	

Full Name (Last, First, Middle Initial) <b>C. TOM CAPOZELLA</b>		Date of Receipt
Mailing Address 331 S. JAMES ST.		<input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City DOVER	State OH	Zip Code 44622
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.257462</b>
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="500.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="500.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="10500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 22 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. PATSY CARLSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1048 NORTH COURT

City BURNS State OR Zip Code 97720

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 ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2014  
**Transaction ID : SA11AI.258304**

Amount of Each Receipt this Period  
 250.00

**B. KATHLEEN CARR**  
Full Name (Last, First, Middle Initial)

Mailing Address 6037 RIDGE DR

City BETHESDA State MD Zip Code 20816

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2014  
**Transaction ID : SA11AI.248796**

Amount of Each Receipt this Period  
 5000.00

**C. EUGENE CARROLL**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 100

City PAWNEE State OK Zip Code 74058

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 29 / 2014  
**Transaction ID : SA11AI.258031**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5350.00

**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 23 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. VIRGINIA CARROLL**  
Full Name (Last, First, Middle Initial)

Mailing Address 5318 BEAVERHEAD DR.

City LAS VEGAS State NV Zip Code 89120

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 ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2014  
**Transaction ID : SA11AI.258163**

Amount of Each Receipt this Period  
 100.00

**B. MR GIUSEPPE CECCHI**  
Full Name (Last, First, Middle Initial)

Mailing Address 1700 N MOORE ST

City ARLINGTON State VA Zip Code 22209

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 04 / 2014  
**Transaction ID : SA11AI.244993**

Amount of Each Receipt this Period  
 250.00

**C. GIUSEPPE CECCHI**  
Full Name (Last, First, Middle Initial)

Mailing Address 1209 ALDEBARAN DR

City MCLEAN State VA Zip Code 22101

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

Name of Employer 101 GROUP COMPANIES Occupation PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2014  
**Transaction ID : SA11AI.250035**

Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1350.00

**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 24 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MARY J CENSKY**  
Full Name (Last, First, Middle Initial)

Mailing Address 1626 S 18TH ST

City MANITOWOC State WI Zip Code 54220

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
04 / 15 / 2014  
Transaction ID : SA11AI.247109

Amount of Each Receipt this Period  
100.00

**B. VIRGINIA T CHAPMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 2610 CRESCENT CIR

City LINCOLN State CA Zip Code 95648

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
04 / 22 / 2014  
Transaction ID : SA11AI.249156

Amount of Each Receipt this Period  
500.00

**C. BERNADETTE M CHARRON**  
Full Name (Last, First, Middle Initial)

Mailing Address 38115 S ROLLING HILLS DR

City TUCSON State AZ Zip Code 85739

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5200.00

Date of Receipt  
04 / 22 / 2014  
Transaction ID : SA11AI.249144

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5600.00
<b>TOTAL</b> 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 25 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. WILLIAM CHILDS**  
Full Name (Last, First, Middle Initial)

Mailing Address 3538 EASTWIND ST

City INDIANAPOLIS State IN Zip Code 46227

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 ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 06 / 2014  
**Transaction ID : SA11AI.255969**

Amount of Each Receipt this Period  
 100.00

**B. BRUCE CHYKA**  
Full Name (Last, First, Middle Initial)

Mailing Address 5165 W. 198TH ST.

City STILWELL State KS Zip Code 66085

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

Name of Employer SELF EMPLOYED Occupation INSPECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2014  
**Transaction ID : SA11AI.256080**

Amount of Each Receipt this Period  
 500.00

**C. MARIAN H COMSTOCK**  
Full Name (Last, First, Middle Initial)

Mailing Address 188 KNOX ST

City MILLINOCKET State ME Zip Code 04462

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 03 / 2014  
**Transaction ID : SA11AI.244479**

Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	650.00
<b>TOTAL</b> 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 26 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. MICHAEL A CONNOR</b>		Date of Receipt
Mailing Address 9360 N SPRUCE RD		<input type="text" value="04"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
MILWAUKEE	WI	53217
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.247359
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
COLUMBIA ST. MARIE HOSPITAL	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MARCIA CONSTANCE</b>		Date of Receipt
Mailing Address 439 MEADOWBROOK DRIVE		<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
SANTA BARBARA	CA	93108
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.258042
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer	Occupation	
NONE	HOMEMAKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. WAYNE COOK</b>		Date of Receipt
Mailing Address 3531 LIBRARY ROAD		<input type="text" value="04"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code
CASTLE SHANNON	PA	15234
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.257328
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1350.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 27 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MS NENETTE COROTTO**  
Full Name (Last, First, Middle Initial)

Mailing Address 291 BLOSSOM LN

City HOLLISTER State CA Zip Code 95023

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 ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 28 / 2014  
**Transaction ID : SA11AI.250539**

Amount of Each Receipt this Period  
 200.00

**B. JANE COX**  
Full Name (Last, First, Middle Initial)

Mailing Address 9046 SANDSTONE ST

City HOUSTON State TX Zip Code 77036

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 ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 07 / 2014  
**Transaction ID : SA11AI.245456**

Amount of Each Receipt this Period  
 50.00

**C. LEWIS CRAIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3512 SHEFFIELD COURT

City ARLINGTON State TX Zip Code 76013

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

Name of Employer RUTLEDGE CRAIN & COMPANY PC Occupation CPA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 25 / 2014  
**Transaction ID : SA11AI.257809**

Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	275.00
<b>TOTAL</b> 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 28 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. DOREEN CROTEAU</b>		Date of Receipt
Mailing Address 4 BEECHWOOD DRIVE		<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
CLIFTON PARK	NY	12065
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.258139</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
SCHENECTADY CITY SCHOOL DISTRICT	TEACHER	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>B. ROGER CROUCH</b>		Date of Receipt
Mailing Address 1310 NE A HWY		<input type="text" value="04"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code
LATHROP	MO	64465
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.257331</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="4999.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="4999.00"/>	

Full Name (Last, First, Middle Initial) <b>C. JAMES L CROWLEY</b>		Date of Receipt
Mailing Address 415 W HAMILTON AVE		<input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
SHERRILL	NY	13461
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.246089</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
INFORMATION REQUESTED	INFORMATION REQUESTED	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="206.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="5149.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 29 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. DANIEL N CUMMINGS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1915 HARBERT AVE

City MEMPHIS State TN Zip Code 38104

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

Name of Employer AMERICAN Occupation PILOT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 03 / 2014  
**Transaction ID : SA11AI.251701**

Amount of Each Receipt this Period  
 100.00

**B. DANIEL N CUMMINGS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1915 HARBERT AVE

City MEMPHIS State TN Zip Code 38104

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

Name of Employer AMERICAN Occupation PILOT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 28 / 2014  
**Transaction ID : SA11AI.253188**

Amount of Each Receipt this Period  
 100.00

**C. NICHOLAS C. CURRIE**  
Full Name (Last, First, Middle Initial)

Mailing Address 6461 HIGHWAY 15 S

City WHITE PLAINS State GA Zip Code 30678

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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 29 / 2014  
**Transaction ID : SA11AI.250899**

Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> 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 30 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. MARION CUSTER**

Mailing Address 5011 MONTICELLO CT.MIDLAND

City MIDLAND	State TX	Zip Code 79705
-----------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation GEOLOGIST
-----------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	21	/	2014

**Transaction ID : SA11AI.257521**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. CAROLYN J DAMON**

Mailing Address PO BOX 791719

City PAIA	State HI	Zip Code 96779
--------------	-------------	-------------------

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 ▼  
285.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	09	/	2014

**Transaction ID : SA11AI.246015**

Amount of Each Receipt this Period  
70.00

Full Name (Last, First, Middle Initial)  
**C. CAROLYN J DAMON**

Mailing Address PO BOX 791719

City PAIA	State HI	Zip Code 96779
--------------	-------------	-------------------

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 ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	22	/	2014

**Transaction ID : SA11AI.249276**

Amount of Each Receipt this Period  
15.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	335.00
<b>TOTAL</b> 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 31 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. VIRGINIA H DEANE</b>		Date of Receipt
Mailing Address 490 HIDDEN VALLEY RD		M M M / D D D / Y Y Y Y Y Y 04 / 22 / 2014
City	State	<b>Transaction ID : SA11AI.249140</b>
SANDPOINT	ID	Amount of Each Receipt this Period
	83864	1000.00
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	2700.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. RICHARD M DELUCCHI</b>		Date of Receipt
Mailing Address 3793 WOODSIDE RD		M M M / D D D / Y Y Y Y Y Y 04 / 12 / 2014
City	State	<b>Transaction ID : SA11AI.256640</b>
WOODSIDE	CA	Amount of Each Receipt this Period
	94062	200.00
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	300.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. DEBORAH DENHAM</b>		Date of Receipt
Mailing Address 420 SO 9TH ST		M M M / D D D / Y Y Y Y Y Y 04 / 09 / 2014
City	State	<b>Transaction ID : SA11AI.256417</b>
MURRAY	KY	Amount of Each Receipt this Period
	42071	250.00
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
NOT EMPLOYED	NOT EMPLOYED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	250.00	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1450.00
<b>TOTAL</b> 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 32 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. DAVID E. DENZEL**  
Full Name (Last, First, Middle Initial)

Mailing Address 7125 NORTHLEDGE DR.

City LOCKPORT	State NY	Zip Code 14094
------------------	-------------	-------------------

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 ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2014

**Transaction ID : SA11AI.247384**

Amount of Each Receipt this Period  
1000.00

**B. JOANNE DETRICK**  
Full Name (Last, First, Middle Initial)

Mailing Address 17 SWALLOW RD

City HOLLAND	State PA	Zip Code 18966
-----------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation ACCOUNTANT
-----------------------------------	--------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	08	/	2014

**Transaction ID : SA11AI.256060**

Amount of Each Receipt this Period  
250.00

**C. DR KATHLEEN H DIAZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 1415 CAMINO AMPARO NW

City ALBUQUERQUE	State NM	Zip Code 87107
---------------------	-------------	-------------------

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

Name of Employer MONROE'S RESTAURANTS	Occupation OWNER
------------------------------------------	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2014

**Transaction ID : SA11AI.257569**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1300.00
<b>TOTAL</b> 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 33 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MRS ALLEN C DIETER**  
Full Name (Last, First, Middle Initial)

Mailing Address 4305 CEDAR BROOK CT

City EAST MOLINE	State IL	Zip Code 61244
---------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	18	/	2014

**Transaction ID : SA11AI.248029**

Amount of Each Receipt this Period  
500.00

**B. MICHAEL A. DIPRIMA**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 318

City ARMUCHEE	State GA	Zip Code 30105
------------------	-------------	-------------------

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 ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2014

**Transaction ID : SA11AI.249263**

Amount of Each Receipt this Period  
100.00

**C. FRANCESCA A DONIG**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 10127

City SAN RAFAEL	State CA	Zip Code 94912
--------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2014

**Transaction ID : SA11AI.247603**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<b>TOTAL</b> 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 34 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JERILEE DOTY**  
Full Name (Last, First, Middle Initial)

Mailing Address 2112 CENTURY PARK LN UNIT 108

City	State	Zip Code
LOS ANGELES	CA	90067

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

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 14 / 2014  
**Transaction ID : SA11AI.246711**

Amount of Each Receipt this Period  
 225.00

**B. DONALD J DOUGLASS**  
Full Name (Last, First, Middle Initial)

Mailing Address 150 EDGEWATER WAY

City	State	Zip Code
MERRITT ISLAND	FL	32953

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

Name of Employer	Occupation
NONE	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 14 / 2014  
**Transaction ID : SA11AI.246488**

Amount of Each Receipt this Period  
 200.00

**C. JOHN K DUCKWORTH**  
Full Name (Last, First, Middle Initial)

Mailing Address 2586 FOGG RD

City	State	Zip Code
NESBIT	MS	38651

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

Name of Employer	Occupation
NONE	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 16 / 2014  
**Transaction ID : SA11AI.247671**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	525.00
<b>TOTAL</b> 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 35 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JOHN K DUCKWORTH**  
Full Name (Last, First, Middle Initial)

Mailing Address 2586 FOGG RD

City NESBIT State MS Zip Code 38651

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 ▼ **325.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 24 / 2014**

**Transaction ID : SA11AI.250072**

Amount of Each Receipt this Period  
**50.00**

**B. DWIGHT E DUNCANSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 15613 N 56TH DR

City GLENDALE State AZ Zip Code 85306

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 ▼ **375.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 24 / 2014**

**Transaction ID : SA11AI.249744**

Amount of Each Receipt this Period  
**125.00**

**C. JON B EAGLESON**  
Full Name (Last, First, Middle Initial)

Mailing Address 12 OAK ST

City KENNEBUNKPORT State ME Zip Code 04046

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 24 / 2014**

**Transaction ID : SA11AI.249662**

Amount of Each Receipt this Period  
**500.00**

**SUBTOTAL** of Receipts This Page (optional)..... **675.00**

**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 36 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. TERESA ECKERT**  
Full Name (Last, First, Middle Initial)

Mailing Address 9518 220TH ST SW

City EDMONDS State WA Zip Code 98020

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
562.00

Date of Receipt  
04 / 22 / 2014  
**Transaction ID : SA11AI.249124**

Amount of Each Receipt this Period  
562.00

**B. MR GORDON EDISON**  
Full Name (Last, First, Middle Initial)

Mailing Address 7009 BARKWATER CT

City BETHESDA State MD Zip Code 20817

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
04 / 03 / 2014  
**Transaction ID : SA11AI.244382**

Amount of Each Receipt this Period  
300.00

**C. WILMA M EDWARDS**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2948

City DEL MAR State CA Zip Code 92014

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
04 / 18 / 2014  
**Transaction ID : SA11AI.252571**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 962.00

**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 37 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. ROSEMARY I EIKE**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 39

City OREGON State IL Zip Code 61061

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
04 / 03 / 2014  
**Transaction ID : SA11AI.244480**

Amount of Each Receipt this Period  
200.00

**B. ALBERT A ENGLAND**  
Full Name (Last, First, Middle Initial)

Mailing Address 1736 W ORANGEWOOD LN

City AVON PARK State FL Zip Code 33825

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
04 / 18 / 2014  
**Transaction ID : SA11AI.247910**

Amount of Each Receipt this Period  
75.00

**C. MR RALPH L ESPOSITO**  
Full Name (Last, First, Middle Initial)

Mailing Address 4774 WASHINGTON AVE

City ORLANDO State FL Zip Code 32819

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
04 / 20 / 2014  
**Transaction ID : SA11AI.257424**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 375.00

**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 38 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. RICHARD C EVANS**  
Full Name (Last, First, Middle Initial)

Mailing Address 10036 HEARTHSIDE PL

City FORT WAYNE State IN Zip Code 46804

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 ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 09 / 2014  
**Transaction ID : SA11AI.245697**

Amount of Each Receipt this Period  
 1000.00

**B. ROBERT G EVANS**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 503408

City INDIANAPOLIS State IN Zip Code 46250

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

Name of Employer OSP Occupation MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2014  
**Transaction ID : SA11AI.257187**

Amount of Each Receipt this Period  
 1000.00

**C. MRS. GRACE B. EVENSTAD**  
Full Name (Last, First, Middle Initial)

Mailing Address 3800 RUM ROW

City NAPLES State FL Zip Code 34102

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2014  
**Transaction ID : SA11AI.249703**

Amount of Each Receipt this Period  
 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7000.00
<b>TOTAL</b> 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 39 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JUANITA EYHERABIDE**  
Full Name (Last, First, Middle Initial)

Mailing Address 5284 KENT DR

City BAKERSFIELD	State CA	Zip Code 93306
---------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	14	/	2014

**Transaction ID : SA11AI.246714**

Amount of Each Receipt this Period  
150.00

**B. JANE FALLON**  
Full Name (Last, First, Middle Initial)

Mailing Address 4775 ORMONDE DR

City CAZENOVA	State NY	Zip Code 13035
------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	07	/	2014

**Transaction ID : SA11AI.245463**

Amount of Each Receipt this Period  
200.00

**C. CAROL A FARKAS**  
Full Name (Last, First, Middle Initial)

Mailing Address 30499 SANTIAM RIVER RD

City LEBANON	State OR	Zip Code 97355
-----------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	08	/	2014

**Transaction ID : SA11AI.245642**

Amount of Each Receipt this Period  
70.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	420.00
<b>TOTAL</b> 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 40 OF 219
<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

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. RAY FAUBION**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2306

City HIGHLANDS	State NC	Zip Code 28741
-------------------	-------------	-------------------

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 ▼ **300.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	07	/	2014

**Transaction ID : SA11AI.245087**

Amount of Each Receipt this Period  

100.00
--------

**B. TIM FERGUSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 210 S. GRAND AVE # 400

City GLENDDORA	State CA	Zip Code 91741
-------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation FAMILY PHYSICIAN
-----------------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	05	/	2014

**Transaction ID : SA11AI.255879**

Amount of Each Receipt this Period  

250.00
--------

**C. TIM FERGUSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 210 S. GRAND AVE # 400

City GLENDDORA	State CA	Zip Code 91741
-------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation FAMILY PHYSICIAN
-----------------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	11	/	2014

**Transaction ID : SA11AI.256615**

Amount of Each Receipt this Period  

100.00
--------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>450.00</b>
<b>TOTAL</b> 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: PAGE 41 OF 219  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR. H DUSTIN FILLMORE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2712 MANORWOOD TRL  
 City State Zip Code  
 FORT WORTH TX 76109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 01 / 2014  
**Transaction ID : SA11AI.243328**  
 Amount of Each Receipt this Period  
 500.00

**B. KAY P FINLAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 LA CERRA CIR  
 City State Zip Code  
 RANCHO MIRAGE CA 92270  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 11 / 2014  
**Transaction ID : SA11AI.246264**  
 Amount of Each Receipt this Period  
 200.00

**C. MR DWIGHT W FITTERER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 154 LOMBARD ST APT 44  
 City State Zip Code  
 SAN FRANCISCO CA 94111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 14 / 2014  
**Transaction ID : SA11AI.246510**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 800.00  
**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 42 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. DR MARVIN FLOSI**  
Full Name (Last, First, Middle Initial)

Mailing Address 1622 COMMON DR

City EL PASO State TX Zip Code 79936

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 01 / 2014  
**Transaction ID : SA11AI.243330**

Amount of Each Receipt this Period  
 100.00

**B. CELIA FORKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1942 STELZER RD.

City COLUMBUS State OH Zip Code 43219

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 ▼ 310.92

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 29 / 2014  
**Transaction ID : SA11AI.250891**

Amount of Each Receipt this Period  
 75.00

**C. MR JOHN K FOSTER**  
Full Name (Last, First, Middle Initial)

Mailing Address 4938 MIDWAY RD

City METROPOLIS State IL Zip Code 62960

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

Name of Employer SELF EMPLOYED Occupation INSURANCE AGENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 03 / 2014  
**Transaction ID : SA11AI.244695**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 425.00

**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 43 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. WILLIAM FRANK</b>		Date of Receipt
Mailing Address 5319 TALLOWOOD WAY		<input type="text" value="04"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
NAPLES	FL	34116
FEC ID number of contributing federal political committee.		<b>Transaction ID : SA11AI.256833</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. RONALD A FRASER</b>		Date of Receipt
Mailing Address 2003 CHEROKEE RD		<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
CARPENTERSVLE	IL	60110
FEC ID number of contributing federal political committee.		<b>Transaction ID : SA11AI.258044</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. LYNNE FREUND</b>		Date of Receipt
Mailing Address 4884 TRENTON FRANKLIN RD		<input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
MIDDLETOWN	OH	45042
FEC ID number of contributing federal political committee.		<b>Transaction ID : SA11AI.250532</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="518.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="200.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text" value=""/>

**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 44 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. GARY K GARBER**  
Full Name (Last, First, Middle Initial)

Mailing Address 416 SILVERWOOD CIR

City REEDS SPRING State MO Zip Code 65737

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
04 / 14 / 2014  
Transaction ID : SA11AI.246489

Amount of Each Receipt this Period  
75.00

**B. BUFORD C GARRETT**  
Full Name (Last, First, Middle Initial)

Mailing Address 412 BROOK GLENN RD

City TAYLORS State SC Zip Code 29687

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
04 / 11 / 2014  
Transaction ID : SA11AI.246245

Amount of Each Receipt this Period  
30.00

**C. ROBERT GARVEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 609 HAYES ST

City ALTUS State OK Zip Code 73521

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
04 / 01 / 2014  
Transaction ID : SA11AI.251537

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 205.00

**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 45 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. ROBERT GARVEY**

Mailing Address 609 HAYES ST

City ALTUS State OK Zip Code 73521

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 ▼  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 18 / 2014  
**Transaction ID : SA11AI.257279**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. CARL G GAUSEWITZ**

Mailing Address 2483 WESTBROOK ST SE

City MAGNOLIA State OH Zip Code 44643

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 15 / 2014  
**Transaction ID : SA11AI.246962**

Amount of Each Receipt this Period  
75.00

Full Name (Last, First, Middle Initial)  
**C. MRS R S GEORGE**

Mailing Address 5301 BRYANT IRVIN RD

City FORT WORTH State TX Zip Code 76132

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 03 / 2014  
**Transaction ID : SA11AI.244508**

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 475.00

**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 46 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. GLENN GILLETTE**  
Full Name (Last, First, Middle Initial)

Mailing Address 3311 ROSSMOOR PKWY APT 3

City WALNUT CREEK	State CA	Zip Code 94595
----------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04	/	16	/	2014

**Transaction ID : SA11AI.247487**

Amount of Each Receipt this Period  
150.00

**B. WILLIAM GILMER**  
Full Name (Last, First, Middle Initial)

Mailing Address 330 NEWHAVEN DRIVE

City FAYETTEVILLE	State GA	Zip Code 30215
----------------------	-------------	-------------------

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

Name of Employer SIMPLY SOUTHERN TRADITIONAL HOMES, INC	Occupation BUILDER
------------------------------------------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04	/	16	/	2014

**Transaction ID : SA11AI.256771**

Amount of Each Receipt this Period  
500.00

**C. DOUGLAS GLEASON**  
Full Name (Last, First, Middle Initial)

Mailing Address 6305 CANDLEPATH TRAIL

City PLANO	State TX	Zip Code 75023
---------------	-------------	-------------------

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

Name of Employer NASSAU SERVICES INC.	Occupation CONSULTING ENGINEER
------------------------------------------	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04	/	08	/	2014

**Transaction ID : SA11AI.256057**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> 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 47 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MONTY GOODWYN**  
Full Name (Last, First, Middle Initial)

Mailing Address 705 PARK LAKE DR.

City MCKINNEY	State TX	Zip Code 75070
------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation SALES
-----------------------------------	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2014  
**Transaction ID : SA11AI.258002**

Amount of Each Receipt this Period  
500.00

**B. JOSEPH GRANGER**  
Full Name (Last, First, Middle Initial)

Mailing Address 7312 MERIDIAN RD SE

City OLYMPIA	State WA	Zip Code 98513
-----------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation APPRAISER
-----------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 18 / 2014  
**Transaction ID : SA11AI.257345**

Amount of Each Receipt this Period  
250.00

**C. ANNA GREEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3321 N RIDGE DR

City WACO	State TX	Zip Code 76710
--------------	-------------	-------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 17 / 2014  
**Transaction ID : SA11AI.247770**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	850.00
<b>TOTAL</b> 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 48 OF 219
<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

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. VIVIAN B GREENE**  
Full Name (Last, First, Middle Initial)

Mailing Address 1660 PARKCREST CIR APT 300

City RESTON	State VA	Zip Code 20190
----------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	09	/	2014

**Transaction ID : SA11AI.245691**

Amount of Each Receipt this Period  
150.00

**B. JAY R GREIDER**  
Full Name (Last, First, Middle Initial)

Mailing Address 3690 KEEN AVE

City COLUMBIA	State PA	Zip Code 17512
------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	11	/	2014

**Transaction ID : SA11AI.246337**

Amount of Each Receipt this Period  
50.00

**C. MORT GROSCH**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 270

City ALBION	State NE	Zip Code 68620
----------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation WATER WELL DRILLING
-----------------------------------	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
410.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	14	/	2014

**Transaction ID : SA11AI.246540**

Amount of Each Receipt this Period  
110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	310.00
<b>TOTAL</b> 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 49 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. MORT GROSCH</b>		Date of Receipt
Mailing Address PO BOX 270		<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code
ALBION	NE	68620
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.246668
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
SELF EMPLOYED	WATER WELL DRILLING	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="460.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. GARY GROSNER</b>		Date of Receipt
Mailing Address 5486 VIA MARINA		<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
WILLIAMSVILLE	NY	14221
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.249935
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="600.00"/>
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1200.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. HELEN R. GROSS</b>		Date of Receipt
Mailing Address 2455 E WOODSTONE DR HELEN R. GROSS LIVING TRUST		<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Zip Code
HAYDEN	ID	83835
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.249094
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="5650.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 50 OF 219
	<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

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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. EVELYN GROSS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2300 W VICTORIA AVE

City State Zip Code  
MONTEBELLO CA 90640

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2014  
**Transaction ID : SA11AI.258477**

Amount of Each Receipt this Period  
50.00

**B. ROBERT GRUNSKY**  
Full Name (Last, First, Middle Initial)

Mailing Address 2007-A OPPORTUNITY DR, STE2

City State Zip Code  
ROSEVILLE CA 95678

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

Name of Employer Occupation  
GRUNSKY INS SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 18 / 2014  
**Transaction ID : SA11AI.257352**

Amount of Each Receipt this Period  
250.00

**C. KERMIT L HAAS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1114 E WASHINGTON AVE

City State Zip Code  
COUNCIL BLUFFS IA 51503

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 14 / 2014  
**Transaction ID : SA11AI.246490**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<b>TOTAL</b> 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 51 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR RAYMOND L HACKERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 221 NORTH BLVD  
 City SALISBURY State MD Zip Code 21801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 21 / 2014  
**Transaction ID : SA11AI.248332**  
 Amount of Each Receipt this Period  
 100.00

**B. VAUGHN E HADLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 112 DENSMORE RD  
 City CHELSEA State VT Zip Code 05038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 16 / 2014  
**Transaction ID : SA11AI.247322**  
 Amount of Each Receipt this Period  
 50.00

**C. MR WILLIAM SCOTT HALE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3640 FILLMORE ST APT 105  
 City SAN FRANCISCO State CA Zip Code 94123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2014  
**Transaction ID : SA11AI.247260**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> 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 52 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. TOMMY S HALL**

Mailing Address 19115 ALDINE WESTFIELD RD

City HOUSTON	State TX	Zip Code 77073
-----------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	24	/	2014

**Transaction ID : SA11AI.249965**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. BRUCE T HALLE**

Mailing Address 14454 N OLD RANCH HOUSE RD

City MARANA	State AZ	Zip Code 85658
----------------	-------------	-------------------

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 ▼  
900.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	18	/	2014

**Transaction ID : SA11AI.247975**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. MR. JAMES H. HAMMER**

Mailing Address PO BOX 4630

City BALTIMORE	State MD	Zip Code 21212
-------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	15	/	2014

**Transaction ID : SA11AI.246970**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5600.00
<b>TOTAL</b> 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 53 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. RICHARD L HANCHETT**  
Full Name (Last, First, Middle Initial)

Mailing Address 19775 TANGLEWOOD

City State Zip Code  
BIG RAPIDS MI 49307

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2200.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 03 / 2014  
**Transaction ID : SA11AI.244265**

Amount of Each Receipt this Period  
2000.00

**B. TIM HARDING**  
Full Name (Last, First, Middle Initial)

Mailing Address 15696 HARDING RD

City State Zip Code  
BRYAN TX 77807

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

Name of Employer Occupation  
SELF EMPLOYED CONSTRUCTION

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2014  
**Transaction ID : SA11AI.258213**

Amount of Each Receipt this Period  
100.00

**C. RICHARD HARPER**  
Full Name (Last, First, Middle Initial)

Mailing Address 176 RAINBOW DR

City State Zip Code  
LIVINGSTON TX 77399

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 19 / 2014  
**Transaction ID : SA11AI.257399**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2600.00
<b>TOTAL</b> 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 54 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. DANA HARRIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 11405 FOSTER

City OVERLAND PARK State KS Zip Code 66210

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

Name of Employer HARRIS AND HART LLC Occupation ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 09 / 2014  
**Transaction ID : SA11AI.256418**

Amount of Each Receipt this Period  
 100.00

**B. DANA HARRIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 11405 FOSTER

City OVERLAND PARK State KS Zip Code 66210

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

Name of Employer HARRIS AND HART LLC Occupation ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 19 / 2014  
**Transaction ID : SA11AI.257418**

Amount of Each Receipt this Period  
 100.00

**C. S HART**  
Full Name (Last, First, Middle Initial)

Mailing Address 345 PIN OAK RD

City FREEHOLD State NJ Zip Code 07728

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

Name of Employer QCOM Occupation ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 18 / 2014  
**Transaction ID : SA11AI.257268**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00

**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 55 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR RICHARD J HARTIG**  
Full Name (Last, First, Middle Initial)

Mailing Address 560 VILLA ST

City DUBUQUE State IA Zip Code 52003

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

Name of Employer HARTIG DOUG CO Occupation PHARMACIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 16 / 2014  
**Transaction ID : SA11AI.247293**

Amount of Each Receipt this Period  
 500.00

**B. HARRY HEATER**  
Full Name (Last, First, Middle Initial)

Mailing Address 330 RIDGE RD

City SPRING CITY State PA Zip Code 19475

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 10 / 2014  
**Transaction ID : SA11AI.246127**

Amount of Each Receipt this Period  
 200.00

**C. KERMIT HEATON**  
Full Name (Last, First, Middle Initial)

Mailing Address 363 PAINT CREEK SOUTH ROAD

City PAIGE State TX Zip Code 78659

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

Name of Employer SELF EMPLOYED Occupation RANCHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 13 / 2014  
**Transaction ID : SA11AI.256716**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 950.00

**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 56 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR JAMES B HEISLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1935 BROTHERS CT

City SAINT PETERS State MO Zip Code 63376

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 ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2014  
**Transaction ID : SA11AI.250005**

Amount of Each Receipt this Period  
 450.00

**B. DONALD HELD**  
Full Name (Last, First, Middle Initial)

Mailing Address 6081 SILVER KING BLVD

City CAPE CORAL State FL Zip Code 33914

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

Name of Employer HELD ENTERPRISE Occupation CONSULTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 21 / 2014  
**Transaction ID : SA11AI.257527**

Amount of Each Receipt this Period  
 250.00

**C. GERARD HELLEBUSCH**  
Full Name (Last, First, Middle Initial)

Mailing Address 143 COUNTRY RIDGE LN

City WASHINGTON State MO Zip Code 63090

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

Name of Employer GH TOOL Occupation OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 16 / 2014  
**Transaction ID : SA11AI.257050**

Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1200.00
<b>TOTAL</b> 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 57 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. HENRY HENGLEIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 200 CRYSTAL SPRINGS CIR

City JOHNSON CITY State TN Zip Code 37615

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
04 / 24 / 2014  
**Transaction ID : SA11AI.249958**

Amount of Each Receipt this Period  
100.00

**B. MR JERRY W HERRINGTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 6901 S 129TH WEST AVE

City SAPULPA State OK Zip Code 74066

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
262.50

Date of Receipt  
04 / 16 / 2014  
**Transaction ID : SA11AI.247465**

Amount of Each Receipt this Period  
112.50

**C. MARLENE HERTZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 20929 VENTURA BLVD. #47-462

City WOODLAND HILLS State CA Zip Code 91364

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

Name of Employer Occupation  
DR. GARY ALTER MED. OFF. ASST.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
04 / 16 / 2014  
**Transaction ID : SA11AI.257054**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 312.50

**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 58 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. DONNA HETLAND</b>		Date of Receipt
Mailing Address 122 APRIL BREEZE ST		<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Zip Code
MONTGOMERY	TX	77356
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.249166</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
INFORMATION REQUESTED	INFORMATION REQUESTED	<input type="text" value="5000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5150.00"/>	

Full Name (Last, First, Middle Initial) <b>B. BRUCE HILL</b>		Date of Receipt
Mailing Address 2016 WORTHINGTON LN.		<input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
EDMOND	OK	73013
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.257561</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
ALFREDO'S	OWNER	<input type="text" value="3000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="3000.00"/>	

Full Name (Last, First, Middle Initial) <b>C. ORVAL HILL</b>		Date of Receipt
Mailing Address 11331 CAPISTRANO CT		<input type="text" value="04"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
FT MYERS	FL	33908
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.257771</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="525.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="8500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 59 OF 219  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. RUSSELL W HIPPLEWITZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 120 OAK PINES BLVD  
 City State Zip Code  
 PEMBERTON NJ 08068  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 245.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 17 / 2014  
**Transaction ID : SA11AI.247815**  
 Amount of Each Receipt this Period  
 35.00

**B. MR FLOYD HOLDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1322 HEATHWICK LN  
 City State Zip Code  
 HOUSTON TX 77043  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 T. HOMES HOME BUILDER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2014  
**Transaction ID : SA11AI.243355**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR EDWARD J HOLMES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 896 WEATHERWOOD LN APT 210  
 City State Zip Code  
 GREENSBURG PA 15601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2014  
**Transaction ID : SA11AI.246082**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ► 1085.00  
**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 60 OF 219
<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

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. GAY HORN**  
Full Name (Last, First, Middle Initial)

Mailing Address 373 HORN LN

City AUSTIN State AR Zip Code 72007

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2014  
**Transaction ID : SA11AI.246842**

Amount of Each Receipt this Period  
 200.00

**B. DIANNE HORWITZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 590 BRIAR LANE

City NORTHFIELD State IL Zip Code 60093

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2014  
**Transaction ID : SA11AI.257198**

Amount of Each Receipt this Period  
 100.00

**C. WILLIAM B HOTALING**  
Full Name (Last, First, Middle Initial)

Mailing Address 125 QUASSAICK AVE

City NEW WINDSOR State NY Zip Code 12553

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 ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2014  
**Transaction ID : SA11AI.248836**

Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1300.00
<b>TOTAL</b> 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 61 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR J ANDREW HUANG**  
Full Name (Last, First, Middle Initial)

Mailing Address 2212 ROSA VISTA TER

City CAMARILLO State CA Zip Code 93012

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 26 / 2014  
**Transaction ID : SA11AI.257920**

Amount of Each Receipt this Period  
100.00

**B. THOMAS O HUFFHINES**  
Full Name (Last, First, Middle Initial)

Mailing Address 122 TRIPLE K CT

City WEATHERFORD State TX Zip Code 76087

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 22 / 2014  
**Transaction ID : SA11AI.248786**

Amount of Each Receipt this Period  
100.00

**C. CAROLYN KEITHLINE INGLETT**  
Full Name (Last, First, Middle Initial)

Mailing Address 1259 WATERSIDE CIR

City DALLAS State TX Zip Code 75218

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 01 / 2014  
**Transaction ID : SA11AI.243533**

Amount of Each Receipt this Period  
240.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	440.00
<b>TOTAL</b> 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 62 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. WILLIAM S JACKSON**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 528

City APPLING State GA Zip Code 30802

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
04 / 15 / 2014  
**Transaction ID : SA11AI.247023**

Amount of Each Receipt this Period  
200.00

**B. ROBERT JACKSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1400 NE 2ND AVE APT 1101

City PORTLAND State OR Zip Code 97232

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 ▼ 700.00

Date of Receipt  
04 / 16 / 2014  
**Transaction ID : SA11AI.257016**

Amount of Each Receipt this Period  
500.00

**C. JOE JANICK**  
Full Name (Last, First, Middle Initial)

Mailing Address 2533 E BERYL AVE

City PHOENIX State AZ Zip Code 85028

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 ▼ 1500.00

Date of Receipt  
04 / 15 / 2014  
**Transaction ID : SA11AI.246820**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1200.00

**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 63 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. JOE JANICK</b>		Date of Receipt
Mailing Address 2533 E BERYL AVE		M M M / D D D / Y Y Y Y Y Y 04 / 18 / 2014
City	State	Zip Code
PHOENIX	AZ	85028
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.257362
C		Amount of Each Receipt this Period
		5000.00
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	6500.00	

Full Name (Last, First, Middle Initial) <b>B. PATRICIA JASPER</b>		Date of Receipt
Mailing Address 14907 SUN HARBOR DR.		M M M / D D D / Y Y Y Y Y Y 04 / 16 / 2014
City	State	Zip Code
HOUSTON	TX	77062
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.256805
C		Amount of Each Receipt this Period
		100.00
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	250.00	

Full Name (Last, First, Middle Initial) <b>C. ERIC M. JAVITS</b>		Date of Receipt
Mailing Address 150 BRADLEY PL. APT. 407		M M M / D D D / Y Y Y Y Y Y 04 / 18 / 2014
City	State	Zip Code
PALM BEACH	FL	33480
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.257311
C		Amount of Each Receipt this Period
		250.00
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5350.00
<b>TOTAL</b> 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 64 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR KENNETH R. JENKINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 430 TIMBERS EAST DR  
 City HAUGHTON State LA Zip Code 71037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 02 / 2014  
**Transaction ID : SA11AI.243974**  
 Amount of Each Receipt this Period  
 500.00

**B. RONALD JOHNSEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14901 QUORUM DRIVE  
 City DALLAS State TX Zip Code 75254  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AXIOMETRICS INC. Occupation REAL ESTATE RESEARCH  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 27 / 2014  
**Transaction ID : SA11AI.257937**  
 Amount of Each Receipt this Period  
 2500.00

**C. HAROLD R JONES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 63  
 City REAGAN State TN Zip Code 38368  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 02 / 2014  
**Transaction ID : SA11AI.243909**  
 Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3500.00
<b>TOTAL</b> 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 65 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR RICHARD JONES**  
Full Name (Last, First, Middle Initial)

Mailing Address 11389 EVESHAM DR

City WINDERMERE State FL Zip Code 34786

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
04 / 22 / 2014  
**Transaction ID : SA11AI.249044**

Amount of Each Receipt this Period  
1000.00

**B. GEORGE J KACEK**  
Full Name (Last, First, Middle Initial)

Mailing Address 24 WESTVIEW AVE

City CHELMSFORD State MA Zip Code 01824

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
04 / 21 / 2014  
**Transaction ID : SA11AI.248180**

Amount of Each Receipt this Period  
100.00

**C. CARY KATZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 9021 GROVE CREST LANE

City LAS VEGAS State NV Zip Code 89134

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

Name of Employer Occupation  
COLLEGE LOAN CORPORATION CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
04 / 17 / 2014  
**Transaction ID : SA11AI.243154**

Amount of Each Receipt this Period  
50000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 51100.00

**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 66 OF 219
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. NANCY E KAYS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2231 N INDIAN HILL BLVD  
 City CLAREMONT State CA Zip Code 91711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 09 / 2014  
**Transaction ID : SA11AI.245860**  
 Amount of Each Receipt this Period  
 120.00

**B. SAMUEL CHARLES KIEFFER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 80 S GRANT RD  
 City THOMASVILLE State PA Zip Code 17364  
 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 ▼ 800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 17 / 2014  
**Transaction ID : SA11AI.247786**  
 Amount of Each Receipt this Period  
 400.00

**C. DOUG KIGHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3112 SUMMIT CT  
 City LITTLE ROCK State AR Zip Code 72227  
 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 ▼ 240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2014  
**Transaction ID : SA11AI.258292**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	570.00
<b>TOTAL</b> 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 67 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. GIDDENS KING</b>		Date of Receipt
Mailing Address 33 PARADISE LN		<input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
TREASURE ISLAND	FL	33706
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="230.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="30.00"/>

Full Name (Last, First, Middle Initial) <b>B. GIDDENS KING</b>		Date of Receipt
Mailing Address 33 PARADISE LN		<input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
TREASURE ISLAND	FL	33706
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="255.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>

Full Name (Last, First, Middle Initial) <b>C. GIDDENS KING</b>		Date of Receipt
Mailing Address 33 PARADISE LN		<input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
TREASURE ISLAND	FL	33706
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="280.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="80.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 68 OF 219  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. LLOYD KIPP**

Mailing Address 5523 MAKATI CIRCLE

City State Zip Code  
SAN JOSE CA 95123

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

Name of Employer Occupation  
VALLEY MANAGEMENT GROUP PROPERTY MANAGER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2014  
**Transaction ID : SA11AI.257178**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**B. DONALD KIRCHNER**

Mailing Address 1298 MISTYMEADOW LANE

City State Zip Code  
CINCINNATI OH 45230

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

Name of Employer Occupation  
P&G MANAGER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 21 / 2014  
**Transaction ID : SA11AI.257445**

Amount of Each Receipt this Period  
25.00

Full Name (Last, First, Middle Initial)  
**C. DONALD KIRCHNER**

Mailing Address 1298 MISTYMEADOW LANE

City State Zip Code  
CINCINNATI OH 45230

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

Name of Employer Occupation  
P&G MANAGER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 25 / 2014  
**Transaction ID : SA11AI.257765**

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 350.00

**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: PAGE 69 OF 219  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. PAUL W KNOOP**

Mailing Address 3405 UNIONVILLE RD

City State Zip Code  
UNIONVILLE NV 89418

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 25 / 2014  
**Transaction ID : SA11AI.250298**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MR CHARLES E KNOPF JR**

Mailing Address 6680 SE HARBOR CIR

City State Zip Code  
STUART FL 34996

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 25 / 2014  
**Transaction ID : SA11AI.250169**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. LIV KNUDSON**

Mailing Address 1408 GOLD CIR

City State Zip Code  
ROCKLIN CA 95765

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 03 / 2014  
**Transaction ID : SA11AI.244549**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00

**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 70 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JAMES KOHLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2709 LANSDOWNE RD

City WATERFORD State MI Zip Code 48329

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

Name of Employer SELF EMPLOYED Occupation DENTIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 09 / 2014  
**Transaction ID : SA11AI.245741**

Amount of Each Receipt this Period  
 100.00

**B. GENE K KOMATSU**  
Full Name (Last, First, Middle Initial)

Mailing Address 1804 HARKNESS ST

City MANHATTAN BEACH State CA Zip Code 90266

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 11 / 2014  
**Transaction ID : SA11AI.246278**

Amount of Each Receipt this Period  
 200.00

**C. MR WILLIAM L KOPP**  
Full Name (Last, First, Middle Initial)

Mailing Address 2 WATERFORD PL

City JACKSON State MS Zip Code 39211

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 ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 21 / 2014  
**Transaction ID : SA11AI.248629**

Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00

**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 71 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. CHARLES KRAUSE</b>		Date of Receipt M M / D D / Y Y Y Y Y 04 / 16 / 2014 <b>Transaction ID : SA11AI.257128</b>
Mailing Address 265 OLD DUBLIN RD		Amount of Each Receipt this Period 1000.00
City PETERBOROUGH	State NH	Zip Code 03458
FEC ID number of contributing federal political committee. C		
Name of Employer SELF EMPLOYED	Occupation INVESTMENT ADVISER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. MR H M KRIMBILL</b>		Date of Receipt M M / D D / Y Y Y Y Y 04 / 15 / 2014 <b>Transaction ID : SA11AI.247002</b>
Mailing Address 5620 E 114TH ST		Amount of Each Receipt this Period 2000.00
City TULSA	State OK	Zip Code 74137
FEC ID number of contributing federal political committee. C		
Name of Employer NGL ENERGY PARTNERS LP	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00	

Full Name (Last, First, Middle Initial) <b>C. DANIEL D KUBIN</b>		Date of Receipt M M / D D / Y Y Y Y Y 04 / 11 / 2014 <b>Transaction ID : SA11AI.246298</b>
Mailing Address 1701 BLOUNT ST		Amount of Each Receipt this Period 100.00
City HOUSTON	State TX	Zip Code 77008
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3100.00
<b>TOTAL</b> 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 72 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. LAWRENCE W. KUNKEL**  
Full Name (Last, First, Middle Initial)

Mailing Address 1025 CROSSWINDS CV.

City COLLIERVILLE	State TN	Zip Code 38017
----------------------	-------------	-------------------

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 ▼  
900.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	14	/	2014

**Transaction ID : SA11AI.246634**

Amount of Each Receipt this Period  
100.00

**B. LAWRENCE W. KUNKEL**  
Full Name (Last, First, Middle Initial)

Mailing Address 1025 CROSSWINDS CV.

City COLLIERVILLE	State TN	Zip Code 38017
----------------------	-------------	-------------------

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 ▼  
1100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	22	/	2014

**Transaction ID : SA11AI.248983**

Amount of Each Receipt this Period  
200.00

**C. ANN LABAR**  
Full Name (Last, First, Middle Initial)

Mailing Address 494 BOULDERCREST DR.

City MARIETTA	State GA	Zip Code 30064
------------------	-------------	-------------------

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

Name of Employer AAPPC	Occupation SONOGRAPHER
---------------------------	---------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	30	/	2014

**Transaction ID : SA11AI.258448**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1300.00
<b>TOTAL</b> 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 73 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. JAMES E LAIN</b>		Date of Receipt M M / D D / Y Y Y Y Y 04 / 07 / 2014 <b>Transaction ID : SA11AI.245168</b>
Mailing Address 16116 BONAIRE CIR		Amount of Each Receipt this Period 200.00
City HUNTINGTN BCH	State CA	Zip Code 92649
FEC ID number of contributing federal political committee.	C	
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. GEORGE LANDON</b>		Date of Receipt M M / D D / Y Y Y Y Y 04 / 03 / 2014 <b>Transaction ID : SA11AI.244061</b>
Mailing Address PO BOX 301		Amount of Each Receipt this Period 2000.00
City ALEXANDRIA	State KY	Zip Code 41001
FEC ID number of contributing federal political committee.	C	
Name of Employer DIVERSIFIED OPHTHALMICS, INC.	Occupation OPTOMETRIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C. MERRITT LANE</b>		Date of Receipt M M / D D / Y Y Y Y Y 04 / 09 / 2014 <b>Transaction ID : SA11AI.245975</b>
Mailing Address 112 SUNSET CT		Amount of Each Receipt this Period 150.00
City CARROLLTON	State GA	Zip Code 30117
FEC ID number of contributing federal political committee.	C	
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2350.00
<b>TOTAL</b> 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 74 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR VERLIN E. LANGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8807 SHATUC RD  
 City CENTRALIA State IL Zip Code 62801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 21 / 2014  
**Transaction ID : SA11AI.248231**  
 Amount of Each Receipt this Period  
 75.00

**B. GARY LANIER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 22722 ABBUTSFORD LANE  
 City KATY State TX Zip Code 77450  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CATHEXIS OIL & GAS Occupation GEOLOGIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 23 / 2014  
**Transaction ID : SA11AI.257665**  
 Amount of Each Receipt this Period  
 150.00

**C. MS. YVONNE B LAROWE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5940 E DEBORAH ST  
 City LONG BEACH State CA Zip Code 90815  
 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 ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2014  
**Transaction ID : SA11AI.251907**  
 Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> 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 75 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. NEIL E LAVANCHY**

Mailing Address 1144 COUNTY ROAD 347

City	State	Zip Code
JACKSON	MO	63755

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

Name of Employer	Occupation
SEMO HOSP.	RN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2014  
**Transaction ID : SA11AI.249188**

Amount of Each Receipt this Period  
200.00

Full Name (Last, First, Middle Initial)  
**B. IRENE LAVOR**

Mailing Address 6261 E VISTA DEL CANON

City	State	Zip Code
TUCSON	AZ	85750

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

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
410.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2014  
**Transaction ID : SA11AI.249168**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. BARBARA LEAS**

Mailing Address 1120 HUFFMAN RD STE 24 PMB 205

City	State	Zip Code
ANCHORAGE	AK	99515

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

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 14 / 2014  
**Transaction ID : SA11AI.246758**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> 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 76 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. LTCOL MERRIE J LEITE**  
Full Name (Last, First, Middle Initial)

Mailing Address 2171 STAGE STOP DR

City HENDERSON	State NV	Zip Code 89052
-------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	11	/	2014

**Transaction ID : SA11AI.246281**

Amount of Each Receipt this Period  
275.00

**B. MR DAN M LEONARD**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 3422

City MIDLAND	State TX	Zip Code 79702
-----------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	18	/	2014

**Transaction ID : SA11AI.247964**

Amount of Each Receipt this Period  
500.00

**C. MS MARIE J LETT**  
Full Name (Last, First, Middle Initial)

Mailing Address 3940 LETT LN

City BURLESON	State TX	Zip Code 76028
------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	14	/	2014

**Transaction ID : SA11AI.246514**

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1075.00
<b>TOTAL</b> 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 77 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. HERBERT ALAN LEVIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 724 E GRINNELL DR

City BURBANK State CA Zip Code 91501

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

Name of Employer DEPT OF JUSTICE OF THE STATE OF CA Occupation ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt 04 / 15 / 2014  
**Transaction ID : SA11AI.247238**

Amount of Each Receipt this Period 75.00

**B. JOHN W LODGE**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 96589

City HOUSTON State TX Zip Code 77213

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

Name of Employer LODUL LBB COMPANY Occupation PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 24 / 2014  
**Transaction ID : SA11AI.249651**

Amount of Each Receipt this Period 1000.00

**C. MR. ROBERT LONG**  
Full Name (Last, First, Middle Initial)

Mailing Address 47 SAVANNAH TRL

City HILTON HEAD ISLAND State SC Zip Code 29926

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 09 / 2014  
**Transaction ID : SA11AI.245700**

Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1175.00

**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 78 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. WILLIAM LONGEST**  
Full Name (Last, First, Middle Initial)

Mailing Address 8028 MARTIN FIELD DRIVE

City MECHANICSVILLE	State VA	Zip Code 23111
------------------------	-------------	-------------------

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 ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	29	/	2014

**Transaction ID : SA11AI.257960**

Amount of Each Receipt this Period  
250.00

**B. CHEONG LUM**  
Full Name (Last, First, Middle Initial)

Mailing Address 5617 HALEPA PL

City HONOLULU	State HI	Zip Code 96821
------------------	-------------	-------------------

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 ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	14	/	2014

**Transaction ID : SA11AI.246521**

Amount of Each Receipt this Period  
100.00

**C. WILLIAM C MACKEL**  
Full Name (Last, First, Middle Initial)

Mailing Address 529 ROYAL VIEW ST

City DUARTE	State CA	Zip Code 91010
----------------	-------------	-------------------

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 ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	10	/	2014

**Transaction ID : SA11AI.246232**

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> 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 79 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. FREDERICK MACKINTOSH**  
Full Name (Last, First, Middle Initial)

Mailing Address 7350 LAKESIDE DRIVE

City RENO State NV Zip Code 89511

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 25 / 2014  
**Transaction ID : SA11AI.257827**

Amount of Each Receipt this Period  
100.00

**B. JERRY L MALLET**  
Full Name (Last, First, Middle Initial)

Mailing Address 1030 LAFAYETTE ST

City LAFAYETTE State LA Zip Code 70501

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 14 / 2014  
**Transaction ID : SA11AI.246532**

Amount of Each Receipt this Period  
200.00

**C. BERNICE MALMANGER**  
Full Name (Last, First, Middle Initial)

Mailing Address 828 N EAST AVE

City OAK PARK State IL Zip Code 60302

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 22 / 2014  
**Transaction ID : SA11AI.249127**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<b>TOTAL</b> 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 80 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR R E MALONE**  
Full Name (Last, First, Middle Initial)

Mailing Address 18721 E BUCKSKIN DR

City RIO VERDE State AZ Zip Code 85263

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 25 / 2014  
**Transaction ID : SA11AI.250233**

Amount of Each Receipt this Period  
1000.00

**B. RACHEL K. MANN**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2501

City SARASOTA State FL Zip Code 34230

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 24 / 2014  
**Transaction ID : SA11AI.249959**

Amount of Each Receipt this Period  
10000.00

**C. RALPH E MAPLE**  
Full Name (Last, First, Middle Initial)

Mailing Address 3702 SUNSET BLVD

City HOUSTON State TX Zip Code 77005

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1800.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2014  
**Transaction ID : SA11AI.246955**

Amount of Each Receipt this Period  
900.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 11900.00

**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 81 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. HARRY MARKUS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1735 E TYLER AVE

City FRESNO State CA Zip Code 93701

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

Name of Employer SWIFT TRENT INC. Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2014  
**Transaction ID : SA11AI.249013**

Amount of Each Receipt this Period  
 1000.00

**B. TERRY MARQUARDT**  
Full Name (Last, First, Middle Initial)

Mailing Address 114 CONWAY CT

City CARY State NC Zip Code 27513

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 16 / 2014  
**Transaction ID : SA11AI.257056**

Amount of Each Receipt this Period  
 50.00

**C. RICHARD MARSHALL**  
Full Name (Last, First, Middle Initial)

Mailing Address 35 GREAT HERON LN.

City BROOKFIELD State CT Zip Code 06804

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 ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 02 / 2014  
**Transaction ID : SA11AI.244024**

Amount of Each Receipt this Period  
 400.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1450.00

**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 82 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. HELEN L MARSHALL**  
Full Name (Last, First, Middle Initial)

Mailing Address 827 SUSAN AVE

City WOODSTOCK State VA Zip Code 22664

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 10 / 2014  
**Transaction ID : SA11AI.246177**

Amount of Each Receipt this Period  
200.00

**B. ROBERT W. MARTIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 6 HICKORY WOODS DR.

City LOVELAND State OH Zip Code 45140

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 07 / 2014  
**Transaction ID : SA11AI.245095**

Amount of Each Receipt this Period  
25.00

**C. ROBERT L MARTIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 10081 MELODY PARK DR

City GARDEN GROVE State CA Zip Code 92840

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 14 / 2014  
**Transaction ID : SA11AI.246504**

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 375.00

**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: PAGE 83 OF 219  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. ROBERT MARTIN**

Mailing Address 80 TOPKIE DR.

City State Zip Code  
SEDONA AZ 86336

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

Name of Employer Occupation  
MARTIN & ASSOCIATES MANAGEMENT CONSULTANT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2014  
**Transaction ID : SA11AI.257192**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. VINCENT MASSARO**

Mailing Address 145 TOSCA DRIVE

City State Zip Code  
STOUGHTON MA 02072

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

Name of Employer Occupation  
CLIMATE CONTROL AIR AND HEAT MECHANIC

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 06 / 2014  
**Transaction ID : SA11AI.255979**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. ERIC S MAST**

Mailing Address 634 CHESTNUT AVE

City State Zip Code  
RICHLAND WA 99352

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 14 / 2014  
**Transaction ID : SA11AI.246544**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00

**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 84 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. KENNETH J MAYER**  
Full Name (Last, First, Middle Initial)

Mailing Address 14534 COUNTY ROAD 19

City PLATTEVILLE State CO Zip Code 80651

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
04 / 03 / 2014  
**Transaction ID : SA11AI.244117**

Amount of Each Receipt this Period  
300.00

**B. THORN MAYES**  
Full Name (Last, First, Middle Initial)

Mailing Address 200 SORTAIS RD.

City DURANGO State CO Zip Code 81301

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 ▼ 4600.00

Date of Receipt  
04 / 25 / 2014  
**Transaction ID : SA11AI.250274**

Amount of Each Receipt this Period  
4600.00

**C. BARBARA MC DONALD**  
Full Name (Last, First, Middle Initial)

Mailing Address 1809 HAWTHORN DR

City RICHMOND State TX Zip Code 77469

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5500.00

Date of Receipt  
04 / 21 / 2014  
**Transaction ID : SA11AI.248653**

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 9900.00

**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 85 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. WILLIAM MCCAFFREY**  
Full Name (Last, First, Middle Initial)

Mailing Address 11150 HARBOUR YACHT COURT

City FORT MYERS	State FL	Zip Code 33908
--------------------	-------------	-------------------

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 ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2014

**Transaction ID : SA11AI.257891**

Amount of Each Receipt this Period  
100.00

**B. GAYLE MCCANN**  
Full Name (Last, First, Middle Initial)

Mailing Address 207 LITTLE CANADA ROAD E

City SAINT PAUL	State MN	Zip Code 55117
--------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	23	/	2014

**Transaction ID : SA11AI.257651**

Amount of Each Receipt this Period  
250.00

**C. PAUL MCCLUSKEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 5825 GLENRIDGE DR STE 2-104

City ATLANTA	State GA	Zip Code 30328
-----------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation PHYSICIAN
-----------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	28	/	2014

**Transaction ID : SA11AI.253192**

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> 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 86 OF 219
<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

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JAMES D. MCCULLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 935 WOODWINDS DR.

City COOKEVILLE State TN Zip Code 38501

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
04 / 15 / 2014  
**Transaction ID : SA11AI.246871**

Amount of Each Receipt this Period  
100.00

**B. ANN MCDANIEL**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1627

City ALPINE State TX Zip Code 79831

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
04 / 16 / 2014  
**Transaction ID : SA11AI.247324**

Amount of Each Receipt this Period  
500.00

**C. ROBERT L MCDONALD**  
Full Name (Last, First, Middle Initial)

Mailing Address 2018 HIDDEN CREST DR

City EL CAJON State CA Zip Code 92019

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
04 / 08 / 2014  
**Transaction ID : SA11AI.245659**

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	900.00
<b>TOTAL</b> 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 87 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JOEY MCDONALD**  
Full Name (Last, First, Middle Initial)

Mailing Address 5176 CALHOUN 26

City HAMPTON	State AR	Zip Code 71744
-----------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 18 / 2014  
**Transaction ID : SA11AI.257387**

Amount of Each Receipt this Period  
200.00

**B. ED J MCGOWAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 8165 DIXIE SHREVEPORT RD

City SHREVEPORT	State LA	Zip Code 71107
--------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 29 / 2014  
**Transaction ID : SA11AI.251126**

Amount of Each Receipt this Period  
300.00

**C. MASON MCKIBBEN JR**  
Full Name (Last, First, Middle Initial)

Mailing Address 4 WOODLEAF AVE

City REDWOOD CITY	State CA	Zip Code 94061
----------------------	-------------	-------------------

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 ▼  
210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 16 / 2014  
**Transaction ID : SA11AI.256994**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<b>TOTAL</b> 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 88 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. STEVE MCNEELY**  
Full Name (Last, First, Middle Initial)

Mailing Address 1804 HUNTINGTON WOODS CIR

City Kingsport State TN Zip Code 37660

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
04 / 28 / 2014  
**Transaction ID : SA11AI.253430**

Amount of Each Receipt this Period  
200.00

**B. MICHAEL MCTIERNAN**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1090

City Oklahoma City State OK Zip Code 73101

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
04 / 21 / 2014  
**Transaction ID : SA11AI.248160**

Amount of Each Receipt this Period  
250.00

**C. CHARLES A. MCWILLIAMS**  
Full Name (Last, First, Middle Initial)

Mailing Address 9015 ADMIRAL VERNON TER.

City Alexandria State VA Zip Code 22309

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
04 / 10 / 2014  
**Transaction ID : SA11AI.246052**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00

**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 89 OF 219
	<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	

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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. BERNARD L MEIER**

Mailing Address 12101 LANHAM SEVERN RD

City BOWIE State MD Zip Code 20720

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
04 / 09 / 2014  
**Transaction ID : SA11AI.245775**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. JOAN G MILAM**

Mailing Address 2673 CENTER COURT DR

City WESTON State FL Zip Code 33332

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
04 / 24 / 2014  
**Transaction ID : SA11AI.249652**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. CHRISTINE MILLER**

Mailing Address 1166 NINE FOOT RD

City GREENWOOD State DE Zip Code 19950

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

Name of Employer Occupation  
SELF EMPLOYED RENTAL PROPERTY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
04 / 29 / 2014  
**Transaction ID : SA11AI.251061**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00

**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 90 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. DALE MILTON**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 6248

City SILVER SPRING State MD Zip Code 20916

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

Name of Employer DEPARTMENT OF NAVY Occupation ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2014  
**Transaction ID : SA11AI.257140**

Amount of Each Receipt this Period  
 100.00

**B. GLADYS M MITCHELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 814 S KINNEY AVE

City MT PLEASANT State MI Zip Code 48858

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2014  
**Transaction ID : SA11AI.245645**

Amount of Each Receipt this Period  
 200.00

**C. RICHARD H MOATS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2825 41ST WAY SE

City OLYMPIA State WA Zip Code 98501

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 01 / 2014  
**Transaction ID : SA11AI.243392**

Amount of Each Receipt this Period  
 35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 335.00

**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 91 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. MR THOMAS MONTEITH</b>		Date of Receipt
Mailing Address 805 RARITAN RD APT 1B		<input type="text" value="04"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : SA11AI.247470</b>
CLARK	NJ	Amount of Each Receipt this Period
Zip Code		<input type="text" value="35.00"/>
07066		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="247.50"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MR THOMAS MONTEITH</b>		Date of Receipt
Mailing Address 805 RARITAN RD APT 1B		<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : SA11AI.249818</b>
CLARK	NJ	Amount of Each Receipt this Period
Zip Code		<input type="text" value="30.00"/>
07066		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="277.50"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. JON MOORHEAD</b>		Date of Receipt
Mailing Address 3355 INKWOOD LN		<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : SA11AI.249233</b>
THE VILLAGES	FL	Amount of Each Receipt this Period
Zip Code		<input type="text" value="500.00"/>
32163		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="565.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 92 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. BILL J MORRIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 21202 CUPAR LN

City HUNTINGTON BEACH	State CA	Zip Code 92646
--------------------------	-------------	-------------------

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

Name of Employer CITY OF HUNTINGTON BEACH	Occupation COMMUNICATIONS OPERATOR
----------------------------------------------	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2014  
**Transaction ID : SA11AI.245608**

Amount of Each Receipt this Period  
 50.00

**B. BILL J MORRIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 21202 CUPAR LN

City HUNTINGTON BEACH	State CA	Zip Code 92646
--------------------------	-------------	-------------------

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

Name of Employer CITY OF HUNTINGTON BEACH	Occupation COMMUNICATIONS OPERATOR
----------------------------------------------	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 16 / 2014  
**Transaction ID : SA11AI.247414**

Amount of Each Receipt this Period  
 50.00

**C. CHARLES E. MORTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1100 MORNINGSIDE CIR.

City DENISON	State TX	Zip Code 75020
-----------------	-------------	-------------------

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 ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2014  
**Transaction ID : SA11AI.250025**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> 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 93 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MRS. ANN M. MOSLING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address W2230 CUMBERLAND DR  
 City BERLIN State WI Zip Code 54923  
 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 ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 02 / 2014  
**Transaction ID : SA11AI.243967**  
 Amount of Each Receipt this Period  
 300.00

**B. PAULINE A MOTL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 245 E CYNTHIA LN  
 City LA GRANGE State TX Zip Code 78945  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2014  
**Transaction ID : SA11AI.247138**  
 Amount of Each Receipt this Period  
 250.00

**C. MS. JANE RICH MUELLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 SENDA VERDE APT. B  
 City SANTA BARBARA State CA Zip Code 93105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 11 / 2014  
**Transaction ID : SA11AI.252067**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> 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 94 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR THOMAS MURDOUGH**  
Full Name (Last, First, Middle Initial)

Mailing Address 161 AURORA ST

City HUDSON State OH Zip Code 44236

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 18 / 2014  
**Transaction ID : SA11AI.248019**

Amount of Each Receipt this Period  
 1000.00

**B. TERENCE H MURPHREE**  
Full Name (Last, First, Middle Initial)

Mailing Address 1330 ENCLAVE PKWY STE 400

City HOUSTON State TX Zip Code 77077

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

Name of Employer USSI Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 04 / 2014  
**Transaction ID : SA11AI.244741**

Amount of Each Receipt this Period  
 5000.00

**C. TERENCE H MURPHREE**  
Full Name (Last, First, Middle Initial)

Mailing Address 1330 ENCLAVE PKWY STE 400

City HOUSTON State TX Zip Code 77077

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

Name of Employer USSI Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 20000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2014  
**Transaction ID : SA11AI.248896**

Amount of Each Receipt this Period  
 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11000.00
<b>TOTAL</b> 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 95 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MARK L MYATT**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 130813

City BIRMINGHAM State AL Zip Code 35213

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 23 / 2014**

**Transaction ID : SA11AI.249420**

Amount of Each Receipt this Period  
**100.00**

**B. LOIS NEAL**  
Full Name (Last, First, Middle Initial)

Mailing Address 7308 TANGLEGLEN DRIVE

City DALLAS State TX Zip Code 75248

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 21 / 2014**

**Transaction ID : SA11AI.257467**

Amount of Each Receipt this Period  
**50.00**

**C. CLARKE S NELSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1 PLUM CREEK CANYON DR12C

City ELWOOD State NE Zip Code 68937

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 ▼ **320.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 02 / 2014**

**Transaction ID : SA11AI.243761**

Amount of Each Receipt this Period  
**320.00**

**SUBTOTAL** of Receipts This Page (optional)..... **470.00**

**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 96 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR JOE R NEMEC**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 342019

City AUSTIN State TX Zip Code 78734

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 07 / 2014  
**Transaction ID : SA11AI.245249**

Amount of Each Receipt this Period  
500.00

**B. MR RAYMOND NEYER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2453 COVEYRUN S

City CINCINNATI State OH Zip Code 45230

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 ▼  
700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 02 / 2014  
**Transaction ID : SA11AI.243986**

Amount of Each Receipt this Period  
250.00

**C. MARILYN D NIELSON**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 3384

City TORRANCE State CA Zip Code 90510

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 ▼  
550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 12 / 2014  
**Transaction ID : SA11AI.256695**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> 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 97 OF 219
<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

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. FRANK NIESCHWIETZ</b>		Date of Receipt
Mailing Address PO BOX 100		<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
FALLS CITY	TX	78113
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.251052</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="2000.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2500.00"/>	

Full Name (Last, First, Middle Initial) <b>B. HENRY S. NIZKO</b>		Date of Receipt
Mailing Address 657 DORAL LN.		<input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
MELBOURNE	FL	32940
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.256591</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) <b>C. GERALD H NOSTRAND</b>		Date of Receipt
Mailing Address 1437 WYNKOOP DR		<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code
COLORADO SPRINGS	CO	80909
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.246593</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="4000.00"/>
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="8000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="6050.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 98 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. PHILLIP OBENCHAIN</b>		Date of Receipt
Mailing Address 244 S VILLA PL		<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : SA11AI.249038</b>
BOISE	ID	Amount of Each Receipt this Period
	83712	<input type="text" value="5000.00"/>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. ALEC OBERSCHMIDT</b>		Date of Receipt
Mailing Address 3202 UDALL ST		<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : SA11AI.248989</b>
SAN DIEGO	CA	Amount of Each Receipt this Period
	92106	<input type="text" value="100.00"/>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. OTTO OHM</b>		Date of Receipt
Mailing Address 804 PEPPERVINE AVE		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : SA11AI.253741</b>
JACKSONVILLE	FL	Amount of Each Receipt this Period
	32259	<input type="text" value="100.00"/>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="5200.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 99 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. WILLARD OLSON</b>		Date of Receipt
Mailing Address 17638 LYONS ST NE		<input type="text" value="04"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : SA11AI.249563</b>
FOREST LAKE	MN	Amount of Each Receipt this Period
Zip Code		<input type="text" value="50.00"/>
55025		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. CAROL OSWALD</b>		Date of Receipt
Mailing Address 2800 VISTA VIEW LN		<input type="text" value="04"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : SA11AI.248092</b>
PROSPER	TX	Amount of Each Receipt this Period
Zip Code		<input type="text" value="250.00"/>
75078		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MARGARET A OTTO</b>		Date of Receipt
Mailing Address 6270 NW 136TH ST		<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : SA11AI.249874</b>
KANSAS CITY	MO	Amount of Each Receipt this Period
Zip Code		<input type="text" value="100.00"/>
64164		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="230.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="400.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 100 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. THOMAS PAPPAS**  
Full Name (Last, First, Middle Initial)

Mailing Address 4808 S. ARDEN AVE.

City SIOUX FALLS State SD Zip Code 57103

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
04 / 25 / 2014  
**Transaction ID : SA11AI.250342**

Amount of Each Receipt this Period  
100.00

**B. DAN PARKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 4699 KRUEGER RD

City WASHINGTON State TX Zip Code 77880

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

Name of Employer PARKER HOUSE Occupation CONTRACTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
04 / 25 / 2014  
**Transaction ID : SA11AI.250438**

Amount of Each Receipt this Period  
1000.00

**C. MS ANN E PARKS**  
Full Name (Last, First, Middle Initial)

Mailing Address 38115 S ROLLING HILLS DR

City TUCSON State AZ Zip Code 85739

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
04 / 22 / 2014  
**Transaction ID : SA11AI.249178**

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6100.00

**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 101 OF 219
<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

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. DENNIS PASSERI**  
Full Name (Last, First, Middle Initial)

Mailing Address 28501 CHIANTI TERRACE

City BONITA SPRINGS	State FL	Zip Code 34135
------------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation BANKER
-----------------------------------	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	08	/	2014

**Transaction ID : SA11AI.256366**

Amount of Each Receipt this Period  
250.00

**B. JOAN PATTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 7237 EADS AVE.

City LA JOLLA	State CA	Zip Code 92037
------------------	-------------	-------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2014

**Transaction ID : SA11AI.258171**

Amount of Each Receipt this Period  
250.00

**C. RALPH PETERSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 12 MARINERS POINT

City CROSSVILLE	State TN	Zip Code 38558
--------------------	-------------	-------------------

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 ▼  
310.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	25	/	2014

**Transaction ID : SA11AI.257848**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> 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: PAGE 102 OF 219  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. RALPH PETERSON**

Mailing Address 12 MARINERS POINT

City State Zip Code  
CROSSVILLE TN 38558

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 29 / 2014  
**Transaction ID : SA11AI.257997**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. MR GEORGE P PFISTER**

Mailing Address 4494 CROSS CREEK RD

City State Zip Code  
WELLSBURG WV 26070

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 08 / 2014  
**Transaction ID : SA11AI.245625**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**C. THOMAS A PODOMINICK**

Mailing Address PO BOX 261

City State Zip Code  
METALINE FLS WA 99153

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 15 / 2014  
**Transaction ID : SA11AI.246930**

Amount of Each Receipt this Period  
125.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 475.00

**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 103 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. TERRY POE**  
Full Name (Last, First, Middle Initial)

Mailing Address **PO BOX 2170**

City **YUCCA VALLEY** State **CA** Zip Code **92286**

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 ▼ **1500.00**

Date of Receipt  
**04 / 14 / 2014**  
**Transaction ID : SA11AI.246470**

Amount of Each Receipt this Period  
**400.00**

**B. MR. JOHN POLITO**  
Full Name (Last, First, Middle Initial)

Mailing Address **PO BOX 508**

City **COLTS NECK** State **NJ** Zip Code **07722**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
**04 / 28 / 2014**  
**Transaction ID : SA11AI.253215**

Amount of Each Receipt this Period  
**500.00**

**C. MRS MARK C POPE**  
Full Name (Last, First, Middle Initial)

Mailing Address **3439 TUXEDO RD NW**

City **ATLANTA** State **GA** Zip Code **30305**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**04 / 07 / 2014**  
**Transaction ID : SA11AI.245387**

Amount of Each Receipt this Period  
**250.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1150.00</b>
<b>TOTAL</b> 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 104 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. CYNTHIA PORTER**  
Full Name (Last, First, Middle Initial)

Mailing Address 45 MILITIA HILL ROAD

City WARRINGTON	State PA	Zip Code 18976
--------------------	-------------	-------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04	/	17	/	2014

**Transaction ID : SA11AI.257249**

Amount of Each Receipt this Period  
500.00

**B. LARRY POTTER**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 136

City BURKBURNETT	State TX	Zip Code 76354
---------------------	-------------	-------------------

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 ▼  
300.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04	/	01	/	2014

**Transaction ID : SA11AI.243329**

Amount of Each Receipt this Period  
300.00

**C. JAMES POTTER**  
Full Name (Last, First, Middle Initial)

Mailing Address 3860 BALDWIN AVE

City LAFAYETTE	State IN	Zip Code 47905
-------------------	-------------	-------------------

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 ▼  
300.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04	/	02	/	2014

**Transaction ID : SA11AI.243758**

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> 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 105 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR ROBERT H POTTS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 150 MOORINGS PARK DR  
 City NAPLES State FL Zip Code 34105  
 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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2014  
**Transaction ID : SA11AI.248733**  
 Amount of Each Receipt this Period  
 250.00

**B. THOMAS PREDEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 34 SAWGRASS DR  
 City LEMONT State IL Zip Code 60439  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer THOMAS PREDEY Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 14 / 2014  
**Transaction ID : SA11AI.256730**  
 Amount of Each Receipt this Period  
 250.00

**C. PHILIP A PRESTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6735 N MEADOWLARK LN  
 City OWASSO State OK Zip Code 74055  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 03 / 2014  
**Transaction ID : SA11AI.244592**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<b>TOTAL</b> 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 106 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JOHN R PREWETT**  
Full Name (Last, First, Middle Initial)

Mailing Address 1597 PRIMAVERA LN

City NIPOMO	State CA	Zip Code 93444
----------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
525.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	14	/	2014

**Transaction ID : SA11AI.246756**

Amount of Each Receipt this Period  
525.00

**B. ELAINE PRISTO**  
Full Name (Last, First, Middle Initial)

Mailing Address 13825 N CAVE CREEK RD # 308

City PHOENIX	State AZ	Zip Code 85022
-----------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	14	/	2014

**Transaction ID : SA11AI.246707**

Amount of Each Receipt this Period  
10000.00

**C. DAVID R. PROVCHY**  
Full Name (Last, First, Middle Initial)

Mailing Address 5316 E. BEHYMER AVE.

City CLOVIS	State CA	Zip Code 93619
----------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
440.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	11	/	2014

**Transaction ID : SA11AI.246268**

Amount of Each Receipt this Period  
190.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10715.00
<b>TOTAL</b> 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 107 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. THOMAS F PURDON</b>		Date of Receipt
Mailing Address 706 E BENT BRANCH PL		<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
GREEN VALLEY	AZ	85614
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.247811</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MRS JEANETTE S. QUILHOT</b>		Date of Receipt
Mailing Address 9464 S 700 E-92		<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
ROANOKE	IN	46783
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.249672</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="7500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="7500.00"/>	

Full Name (Last, First, Middle Initial) <b>C. ANTHONY C QUINT</b>		Date of Receipt
Mailing Address 810 LAKE POINT CIR		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
MCKINNEY	TX	75070
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.246846</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="7800.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 108 OF 219
<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

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. MR GREGORY QUIRIN</b>		Date of Receipt MM / DD / YYYY 04 / 24 / 2014 <b>Transaction ID : SA11AI.249840</b>
Mailing Address 9004 N BRITT AVE		Amount of Each Receipt this Period 250.00
City KANSAS CITY	State MO	Zip Code 64154
FEC ID number of contributing federal political committee. C		
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>B. JOAN B RAK</b>		Date of Receipt MM / DD / YYYY 04 / 25 / 2014 <b>Transaction ID : SA11AI.250387</b>
Mailing Address 972 E CAMINO DIESTRO		Amount of Each Receipt this Period 2000.00
City TUCSON	State AZ	Zip Code 85704
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>C. ELIJAH W. RAMSEY</b>		Date of Receipt MM / DD / YYYY 04 / 25 / 2014 <b>Transaction ID : SA11AI.250297</b>
Mailing Address 207 KEES CIR		Amount of Each Receipt this Period 250.00
City LAFAYETTE	State LA	Zip Code 70506
FEC ID number of contributing federal political committee. C		
Name of Employer US GOVERNMENT	Occupation RESEARCHER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2275.00
<b>TOTAL</b> 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: PAGE 109 OF 219  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. CLARENCE RANSELM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7900 N LA CANADA DR APT 2228  
 City TUCSON State AZ Zip Code 85704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2014  
**Transaction ID : SA11AI.251966**  
 Amount of Each Receipt this Period  
 25.00

**B. CLARENCE RANSELM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7900 N LA CANADA DR APT 2228  
 City TUCSON State AZ Zip Code 85704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 14 / 2014  
**Transaction ID : SA11AI.246640**  
 Amount of Each Receipt this Period  
 25.00

**C. H K REED**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6129 N WHISPERING OAK LP  
 City BEVERLY HILLS State FL Zip Code 34465  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 202.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 16 / 2014  
**Transaction ID : SA11AI.257133**  
 Amount of Each Receipt this Period  
 102.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 152.00  
**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 110 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. RAYMOND REESE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 703 STUART DR

City SANFORD	State NC	Zip Code 27330
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer SELF EMPLOYED	Occupation ESTATE PLANNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>300.00</b>	

Date of Receipt  
**04 / 02 / 2014**  
**Transaction ID : SA11AI.255786**

Amount of Each Receipt this Period  
**100.00**

**B. RAYMOND REESE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 703 STUART DR

City SANFORD	State NC	Zip Code 27330
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer SELF EMPLOYED	Occupation ESTATE PLANNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>400.00</b>	

Date of Receipt  
**04 / 23 / 2014**  
**Transaction ID : SA11AI.257664**

Amount of Each Receipt this Period  
**100.00**

**C. SHIRLEY A REIDER**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 419

City POTRERO	State CA	Zip Code 91963
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>	

Date of Receipt  
**04 / 07 / 2014**  
**Transaction ID : SA11AI.245445**

Amount of Each Receipt this Period  
**75.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>275.00</b>
<b>TOTAL</b> 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 111 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. SHIRLEY A REIDER**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 419

City POTRERO State CA Zip Code 91963

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
04 / 25 / 2014  
**Transaction ID : SA11AI.250383**

Amount of Each Receipt this Period  
50.00

**B. MR JAMES A REMINGTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2300 CEDARFIELD PKWY APT 263

City RICHMOND State VA Zip Code 23233

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
04 / 11 / 2014  
**Transaction ID : SA11AI.246284**

Amount of Each Receipt this Period  
600.00

**C. MR MATHEW J RENO**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 399

City GILLETTE State WY Zip Code 82717

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

Name of Employer Occupation  
RENO & SON'S, INC RANCHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
04 / 15 / 2014  
**Transaction ID : SA11AI.246903**

Amount of Each Receipt this Period  
750.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1400.00

**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 112 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. KENT RHUDY**

Mailing Address 4210 FOX TRAIL

City TEMPLE State TX Zip Code 76504

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

Name of Employer BLACKLAND IMPLEMENT Occupation MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 12 / 2014  
**Transaction ID : SA11AI.256632**

Amount of Each Receipt this Period  
 250.00

Full Name (Last, First, Middle Initial)  
**B. SAMUEL G RICE**

Mailing Address 515 S 2ND ST

City KING CITY State CA Zip Code 93930

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 ▼ 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 07 / 2014  
**Transaction ID : SA11AI.245104**

Amount of Each Receipt this Period  
 125.00

Full Name (Last, First, Middle Initial)  
**C. WILLIAM B RICE**

Mailing Address 600 FARRELL DR APT 218

City COVINGTON State KY Zip Code 41011

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 ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 09 / 2014  
**Transaction ID : SA11AI.245731**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 475.00

**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: PAGE 113 OF 219  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. MR VINCENT RISO**

Mailing Address 111 CHERRY VALLEY AVE PH W3

City State Zip Code  
GARDEN CITY NY 11530

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 03 / 2014  
**Transaction ID : SA11AI.244451**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. KENNETH L ROLFE**

Mailing Address 301 SE FOUNDATION DR

City State Zip Code  
DALLAS OR 97338

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 07 / 2014  
**Transaction ID : SA11AI.245222**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**C. FRED ROTERT**

Mailing Address 8052 W 850 S

City State Zip Code  
COLUMBUS IN 47201

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 14 / 2014  
**Transaction ID : SA11AI.246650**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 900.00

**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: PAGE 114 OF 219  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. NANCY B ROTH**

Mailing Address 8545 CARMEL VALLEY RD

City State Zip Code  
CARMEL CA 93923

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 18 / 2014  
**Transaction ID : SA11AI.252542**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. RUDY ROTTLER**

Mailing Address 2759 E 213TH ST

City State Zip Code  
LYNDON KS 66451

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 23 / 2014  
**Transaction ID : SA11AI.249493**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. D ROWE**

Mailing Address 3325 PIEDMONT RD. N.E.

City State Zip Code  
ATLANTA GA 30305

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

Name of Employer Occupation  
SELF EMPLOYED INVESTMENTS

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 18 / 2014  
**Transaction ID : SA11AI.257290**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1150.00

**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: PAGE 115 OF 219  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. DONALD M RUSSELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 MAIDEN LN  
 City FALMOUTH State ME Zip Code 04105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2014  
**Transaction ID : SA11AI.246876**  
 Amount of Each Receipt this Period  
 50.00

**B. HOWLAND RUSSELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5814 GABOR DRIVE  
 City SAN ANTONIO State TX Zip Code 78240  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2014  
**Transaction ID : SA11AI.257278**  
 Amount of Each Receipt this Period  
 50.00

**C. DALE W SALSSGIVER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 205  
 City DAYTON State PA Zip Code 16222  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 502.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 14 / 2014  
**Transaction ID : SA11AI.246798**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 200.00  
**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 116 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR ROGER L SCHALLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 46836 CREEKVIEW CT  
 City State Zip Code  
 MACOMB MI 48044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2014  
**Transaction ID : SA11AI.249784**  
 Amount of Each Receipt this Period  
 500.00

**B. MR PAUL J SCHIERL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1815 RAINBOW AVE  
 City State Zip Code  
 DE PERE WI 54115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 07 / 2014  
**Transaction ID : SA11AI.245209**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. JACK SCHINDLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16282 ROAD 20  
 City State Zip Code  
 FORT JENNINGS OH 45844  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 14 / 2014  
**Transaction ID : SA11AI.252239**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<b>TOTAL</b> 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 117 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. RAYMOND G SCHMIDT**  
Full Name (Last, First, Middle Initial)

Mailing Address 1112 NW DEARBORN AVE

City LAWTON State OK Zip Code 73507

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2014  
**Transaction ID : SA11AI.247178**

Amount of Each Receipt this Period  
 300.00

**B. ROBERT SCHNEIDER**  
Full Name (Last, First, Middle Initial)

Mailing Address 14392 WILLOW LN

City TUSTIN State CA Zip Code 92780

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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 06 / 2014  
**Transaction ID : SA11AI.255975**

Amount of Each Receipt this Period  
 250.00

**C. RICHARD V SCHRAMM**  
Full Name (Last, First, Middle Initial)

Mailing Address 1900 WITHNELL AVE

City SAINT LOUIS State MO Zip Code 63118

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

Name of Employer SCHRAMM CARPET CLEANING, INC. Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 25 / 2014  
**Transaction ID : SA11AI.253096**

Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	575.00
<b>TOTAL</b> 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 118 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. MS ALICE M SCHULTE</b>		Date of Receipt
Mailing Address 669 WAVERLY ST		<input type="text" value="04"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : SA11AI.252905</b>
WICHITA	KS	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="300.00"/>
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. LOIS SCHULTZ</b>		Date of Receipt
Mailing Address 7645 BECKER DR		<input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : SA11AI.248535</b>
GREENWOOD	DE	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="100.00"/>
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MR DONALD R SCIFRES</b>		Date of Receipt
Mailing Address 26700 PALO HILLS DR		<input type="text" value="04"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : SA11AI.243676</b>
LOS ALTOS HILLS	CA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="2000.00"/>
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="2400.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 119 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. GEORGE SELLECK**  
Full Name (Last, First, Middle Initial)

Mailing Address 6 STATION AVE

City STATEN ISLAND State NY Zip Code 10309

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 ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2014  
**Transaction ID : SA11AI.246125**

Amount of Each Receipt this Period  
 100.00

**B. RONALD L. SHAW**  
Full Name (Last, First, Middle Initial)

Mailing Address 170 BRAYMOOR CIR.

City FAYETTEVILLE State GA Zip Code 30215

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 ▼ 340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 14 / 2014  
**Transaction ID : SA11AI.246492**

Amount of Each Receipt this Period  
 125.00

**C. MR EDWARD J SHELTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 570 HORSE COVE RD

City GURLEY State AL Zip Code 35748

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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2014  
**Transaction ID : SA11AI.246976**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 275.00

**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 120 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. HARVEY SHEREN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1001 ISLA VERDE SQ

City VERO BEACH State FL Zip Code 32963

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 18 / 2014  
**Transaction ID : SA11AI.247919**

Amount of Each Receipt this Period  
55.00

**B. STUART P SHERMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3 SUTHERLAND CT

City PALM BEACH GARDENS State FL Zip Code 33418

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2014  
**Transaction ID : SA11AI.247660**

Amount of Each Receipt this Period  
500.00

**C. STUART P SHERMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3 SUTHERLAND CT

City PALM BEACH GARDENS State FL Zip Code 33418

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 30 / 2014  
**Transaction ID : SA11AI.258296**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1055.00

**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 121 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. ELIZABETH SHOOK**  
Full Name (Last, First, Middle Initial)

Mailing Address 5118 POSTLEWAITE RD

City COLUMBUS State OH Zip Code 43235

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 29 / 2014  
**Transaction ID : SA11AI.251082**

Amount of Each Receipt this Period  
1000.00

**B. TERRY SIGAFUS**  
Full Name (Last, First, Middle Initial)

Mailing Address 49 HEATHERDOWNS LN

City GALENA State IL Zip Code 61036

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 21 / 2014  
**Transaction ID : SA11AI.248615**

Amount of Each Receipt this Period  
100.00

**C. JEROME M SIMON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1294 ROCK RIMMON RD

City STAMFORD State CT Zip Code 06903

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
950.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 07 / 2014  
**Transaction ID : SA11AI.245234**

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1400.00
<b>TOTAL</b> 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 122 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. NANCY LEA SKELSEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 3106 BARTON POINT DR

City AUSTIN State TX Zip Code 78733

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
04 / 17 / 2014  
**Transaction ID : SA11AI.247771**

Amount of Each Receipt this Period  
100.00

**B. BARBARA M. SKIRMANTS**  
Full Name (Last, First, Middle Initial)

Mailing Address 3359 KINGS MILL RD

City NORTH BRANCH State MI Zip Code 48461

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
04 / 15 / 2014  
**Transaction ID : SA11AI.246918**

Amount of Each Receipt this Period  
250.00

**C. STEVE SLADE**  
Full Name (Last, First, Middle Initial)

Mailing Address 6519 BAYOU GLEN

City HOUSTON State TX Zip Code 77057

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

Name of Employer IRS Occupation PROGRAM ANALYST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
04 / 05 / 2014  
**Transaction ID : SA11AI.255857**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00

**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: PAGE 123 OF 219  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. GARETH SMELTZER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13 EAST MAIN ST.  
 City WINDSOR, PA State PA Zip Code 17366  
 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 ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 08 / 2014  
**Transaction ID : SA11AI.256271**  
 Amount of Each Receipt this Period  
 100.00

**B. MR CONLEY P SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 325 VINE ST  
 City DENVER State CO Zip Code 80206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 09 / 2014  
**Transaction ID : SA11AI.245787**  
 Amount of Each Receipt this Period  
 300.00

**C. MARGARET SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9732 LINDSEY BLAKE LN  
 City GREAT FALLS State VA Zip Code 22066  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 09 / 2014  
**Transaction ID : SA11AI.245901**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00  
**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: PAGE 124 OF 219 (check only one)
<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. EDWARD SMITH**  
Full Name (Last, First, Middle Initial)

Mailing Address 6109 STONEHAVEN DR

City NASHVILLE	State TN	Zip Code 37215
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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 ▼

Date of Receipt  
 /  /   
**Transaction ID : SA11AI.256863**

Amount of Each Receipt this Period

**B. ROBERT SMITH**  
Full Name (Last, First, Middle Initial)

Mailing Address 1051 JAMEY LANE

City ADDISON	State IL	Zip Code 60101
-----------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation MGT COSULTANT
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /   
**Transaction ID : SA11AI.256928**

Amount of Each Receipt this Period

**C. ROBERT SMITH**  
Full Name (Last, First, Middle Initial)

Mailing Address 1051 JAMEY LANE

City ADDISON	State IL	Zip Code 60101
-----------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation MGT COSULTANT
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /   
**Transaction ID : SA11AI.257585**

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="300.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text" value=""/>

**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 125 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. THOMAS SMITH</b>		Date of Receipt
Mailing Address 60 EUGENIE CT		M M M / D D D / Y Y Y Y Y Y 04 / 25 / 2014
City	State	Zip Code
NEW ORLEANS	LA	70131
FEC ID number of contributing federal political committee.	Transaction ID : SA11AI.250460	
C	Amount of Each Receipt this Period	
	5000.00	
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	5000.00	

Full Name (Last, First, Middle Initial) <b>B. THOMAS R SNELL</b>		Date of Receipt
Mailing Address 5131 BRANDILES LN		M M M / D D D / Y Y Y Y Y Y 04 / 10 / 2014
City	State	Zip Code
WINSTON SALEM	NC	27104
FEC ID number of contributing federal political committee.	Transaction ID : SA11AI.246033	
C	Amount of Each Receipt this Period	
	25.00	
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	225.00	

Full Name (Last, First, Middle Initial) <b>C. MR. JAMES H SNELL JR</b>		Date of Receipt
Mailing Address 104 MCKENNA CIR.		M M M / D D D / Y Y Y Y Y Y 04 / 22 / 2014
City	State	Zip Code
LYNCHBURG	VA	24503
FEC ID number of contributing federal political committee.	Transaction ID : SA11AI.248764	
C	Amount of Each Receipt this Period	
	105.00	
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5130.00
<b>TOTAL</b> 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: PAGE 126 OF 219  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. CANDICE D SNYDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3800 CORUM CV  
 City AUSTIN State TX Zip Code 78746  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 22 / 2014  
**Transaction ID : SA11AI.248744**  
 Amount of Each Receipt this Period  
 1000.00

**B. MR. JOSEPH F SPRANKLE III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 901 FREERS CT  
 City CHESAPEAKE State VA Zip Code 23322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 03 / 2014  
**Transaction ID : SA11AI.244080**  
 Amount of Each Receipt this Period  
 100.00

**C. DAVID ST GEORGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19 BEAR HILLS ROAD  
 City NEWTOWN State CT Zip Code 06470  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 30 / 2014  
**Transaction ID : SA11AI.258368**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1350.00  
**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 127 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. CHARLES STARK**  
Full Name (Last, First, Middle Initial)

Mailing Address 3531 W. SPRINGFIELD DR.

City FLORENCE	State SC	Zip Code 29501
------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation FURNITURE RESTORATION
-----------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04	/	29	/	2014

**Transaction ID : SA11AI.258078**

Amount of Each Receipt this Period  
250.00

**B. WARREN E. STAUFFER**  
Full Name (Last, First, Middle Initial)

Mailing Address 51 KEENE ST

City BUZZARDS BAY	State MA	Zip Code 02532
----------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04	/	16	/	2014

**Transaction ID : SA11AI.247612**

Amount of Each Receipt this Period  
100.00

**C. DUANE STEPHENS**  
Full Name (Last, First, Middle Initial)

Mailing Address 12010 KUYKENDAHL RD APT 308

City HOUSTON	State TX	Zip Code 77067
-----------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation GAS WELLS
-----------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04	/	17	/	2014

**Transaction ID : SA11AI.257255**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> 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 128 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. FRANKLIN L STEPHENS**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 631

City EASTPOINT State FL Zip Code 32328

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 18 / 2014**

**Transaction ID : SA11AI.257356**

Amount of Each Receipt this Period  
**200.00**

**B. VIRGINIA STICKELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 3619 VICTORY AVE

City LAS VEGAS State NV Zip Code 89121

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 ▼ **6950.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 28 / 2014**

**Transaction ID : SA11AI.250500**

Amount of Each Receipt this Period  
**5000.00**

**C. THOMAS STIPULKOSKY**  
Full Name (Last, First, Middle Initial)

Mailing Address 29116 LARO DR

City AGOURA HILLS State CA Zip Code 91301

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 07 / 2014**

**Transaction ID : SA11AI.245588**

Amount of Each Receipt this Period  
**100.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>5300.00</b>
<b>TOTAL</b> 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: PAGE 129 OF 219  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. VERNON J STOEHR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 365 E FRANCIS ST  
 City CORONA State CA Zip Code 92879  
 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 ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 03 / 2014  
**Transaction ID : SA11AI.244082**  
 Amount of Each Receipt this Period  
 300.00

**B. RICHARD L STONE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 850 DEVON AVE  
 City LOS ANGELES State CA Zip Code 90024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2014  
**Transaction ID : SA11AI.249783**  
 Amount of Each Receipt this Period  
 5000.00

**C. DONALD B STORMENT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20 N CARRIAGE DR  
 City SAINT JOSEPH State MO Zip Code 64506  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 14 / 2014  
**Transaction ID : SA11AI.246565**  
 Amount of Each Receipt this Period  
 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5450.00  
**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 130 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. RICHARD W. STRAZZA**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 48

City KEYPORT State NJ Zip Code 07735

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

Name of Employer KEY TECH Occupation ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 28 / 2014  
**Transaction ID : SA11AI.250493**

Amount of Each Receipt this Period  
 300.00

**B. TRYOE D SUMMITT**  
Full Name (Last, First, Middle Initial)

Mailing Address 450 BRAKEBILL RD

City VONORE State TN Zip Code 37885

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 14 / 2014  
**Transaction ID : SA11AI.246576**

Amount of Each Receipt this Period  
 125.00

**C. RICHARD SUNGAILA**  
Full Name (Last, First, Middle Initial)

Mailing Address 1827 PORT STANHOPE PL

City NEWPORT BEACH State CA Zip Code 92660

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 ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 21 / 2014  
**Transaction ID : SA11AI.257512**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 475.00

**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 131 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MISS CAROL G SWARTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7007 TUCKAWAY ST  
 City SAN DIEGO State CA Zip Code 92119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2014  
**Transaction ID : SA11AI.246818**  
 Amount of Each Receipt this Period  
 100.00

**B. LEONARD SWEDERSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1416 STONEYRIDGE DR.  
 City CHARLOTTE State NC Zip Code 28214  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SWEDERSKI CONCRETE & PAVING LLC Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 29 / 2014  
**Transaction ID : SA11AI.258017**  
 Amount of Each Receipt this Period  
 1000.00

**C. JANNETTE SWENSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 36 GAME COCK ROAD  
 City GREENWICH State CT Zip Code 06830  
 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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 01 / 2014  
**Transaction ID : SA11AI.255737**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1350.00
<b>TOTAL</b> 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 132 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. RICHARD SWENSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 7011 W SANDPIPER CT

City MILWAUKEE State WI Zip Code 53223

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 ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 18 / 2014  
**Transaction ID : SA11AI.257298**

Amount of Each Receipt this Period  
 100.00

**B. MACKLIN H THOMAS**  
Full Name (Last, First, Middle Initial)

Mailing Address 7797 N JOHN YOUNG RD

City UNIONVILLE State IN Zip Code 47468

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 ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 16 / 2014  
**Transaction ID : SA11AI.247615**

Amount of Each Receipt this Period  
 25.00

**C. KELT L THOMAS**  
Full Name (Last, First, Middle Initial)

Mailing Address 378 SEVILLA DR

City ST AUGUSTINE State FL Zip Code 32086

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2014  
**Transaction ID : SA11AI.249781**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 375.00

**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 133 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. ROBERT A THOMPSON**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 44

City State Zip Code  
QUAKER STREET NY 12141

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 14 / 2014  
**Transaction ID : SA11AI.246564**

Amount of Each Receipt this Period  
200.00

**B. WESLEY R. TINKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 16428 SW HOOPS CT

City State Zip Code  
PORTLAND OR 97223

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 15 / 2014  
**Transaction ID : SA11AI.246880**

Amount of Each Receipt this Period  
35.00

**C. MR KEITH TODD**  
Full Name (Last, First, Middle Initial)

Mailing Address 5266 CREEK WALK CIR

City State Zip Code  
NORCROSS GA 30092

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 02 / 2014  
**Transaction ID : SA11AI.243810**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	485.00
<b>TOTAL</b> 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 134 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. DONNA TUCKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2809 LONCOLA COURT

City ROUND ROCK State TX Zip Code 78681

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

Name of Employer TUCKER ENGINEERING Occupation BUSINESS MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2014  
**Transaction ID : SA11AI.258245**

Amount of Each Receipt this Period  
 500.00

**B. KENNETH R TUXFORD**  
Full Name (Last, First, Middle Initial)

Mailing Address 26038 S NOTTINGHAM DR

City SUN LAKES State AZ Zip Code 85248

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

Name of Employer STATE OF ARIZONA Occupation IT TECH VI

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 03 / 2014  
**Transaction ID : SA11AI.251724**

Amount of Each Receipt this Period  
 100.00

**C. KENNETH R TUXFORD**  
Full Name (Last, First, Middle Initial)

Mailing Address 26038 S NOTTINGHAM DR

City SUN LAKES State AZ Zip Code 85248

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

Name of Employer STATE OF ARIZONA Occupation IT TECH VI

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 28 / 2014  
**Transaction ID : SA11AI.250835**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> 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 135 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. CALVIN K. UPP**  
Full Name (Last, First, Middle Initial)  
Mailing Address 212 N. ELM ST.  
City Wellington State KS Zip Code 67152  
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 1225.00

Date of Receipt 04 / 01 / 2014  
Transaction ID : SA11AI.243406  
Amount of Each Receipt this Period 1025.00

**B. CALVIN K. UPP**  
Full Name (Last, First, Middle Initial)  
Mailing Address 212 N. ELM ST.  
City Wellington State KS Zip Code 67152  
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 2225.00

Date of Receipt 04 / 22 / 2014  
Transaction ID : SA11AI.248920  
Amount of Each Receipt this Period 1000.00

**C. KIM UTLEY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 205 DORIS DRIVE  
City LUCAS State TX Zip Code 75002  
FEC ID number of contributing federal political committee. C  
Name of Employer SIMS INC Occupation PROGRAMMER  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 500.00

Date of Receipt 04 / 12 / 2014  
Transaction ID : SA11AI.256696  
Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional)..... 2525.00  
**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 136 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. BERNARD F VAN DINTER**  
Full Name (Last, First, Middle Initial)

Mailing Address 8081 FIELDING LN

City GREENDALE State WI Zip Code 53129

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 ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 07 / 2014

**Transaction ID : SA11AI.245176**

Amount of Each Receipt this Period  
 600.00

**B. CRANSTON VINCENT**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1107

City RAMSEUR State NC Zip Code 27316

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : SA11AI.251256**

Amount of Each Receipt this Period  
 100.00

**C. HUNT B WAGSTAFF**  
Full Name (Last, First, Middle Initial)

Mailing Address 3514 N PEORIA AVE

City PEORIA State IL Zip Code 61603

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

Name of Employer SELF EMPLOYED Occupation CONTRACTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 28 / 2014

**Transaction ID : SA11AI.250557**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 800.00

**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 137 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. JEARL D WALKER</b>		Date of Receipt
Mailing Address 6917 BAL LAKE DR		M M M / D D D / Y Y Y Y Y Y 04 / 03 / 2014
City	State	Zip Code
FORT WORTH	TX	76116
FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID : <b>SA11AI.244182</b>
Name of Employer INFORMATION REQUESTED		Amount of Each Receipt this Period
Occupation INFORMATION REQUESTED		300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	265.00	

Full Name (Last, First, Middle Initial) <b>B. GERALD WALKER</b>		Date of Receipt
Mailing Address 450 E 83RD ST		M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2014
City	State	Zip Code
NEW YORK	NY	10028
FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID : <b>SA11AI.249983</b>
Name of Employer INFORMATION REQUESTED		Amount of Each Receipt this Period
Occupation INFORMATION REQUESTED		1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	1000.00	

Full Name (Last, First, Middle Initial) <b>C. PATRICIA WALLAUER</b>		Date of Receipt
Mailing Address 298 HEMLOCK AVE		M M M / D D D / Y Y Y Y Y Y 04 / 18 / 2014
City	State	Zip Code
GARWOOD	NJ	07027
FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID : <b>SA11AI.247883</b>
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1330.00
<b>TOTAL</b> 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 138 OF 219
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. MR DON E WASHKEWICZ</b>		Date of Receipt
Mailing Address 7400 ROLLINGBROOK TRL		M M M / D D D / Y Y Y Y Y Y 04 / 22 / 2014
City	State	Zip Code
SOLON	OH	44139
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : SA11AI.248863</b>
Name of Employer INFORMATION REQUESTED		Amount of Each Receipt this Period
Occupation INFORMATION REQUESTED		500.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	500.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. SHIRLEY WEAVER</b>		Date of Receipt
Mailing Address 2907 BOB BETTIS RD		M M M / D D D / Y Y Y Y Y Y 04 / 14 / 2014
City	State	Zip Code
MARIETTA	GA	30066
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : SA11AI.246738</b>
Name of Employer INFORMATION REQUESTED		Amount of Each Receipt this Period
Occupation INFORMATION REQUESTED		100.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	300.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. DAVID WEBER</b>		Date of Receipt
Mailing Address 37307 DIAMOND OAKS DR.		M M M / D D D / Y Y Y Y Y Y 04 / 16 / 2014
City	State	Zip Code
MAGNOLIA	TX	77355
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : SA11AI.256770</b>
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		250.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	250.00	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	850.00
<b>TOTAL</b> 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:	PAGE 139 OF 219
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. WILLIAM WEEKLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 221705

City CHANTILY State VA Zip Code 20153

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 11 / 2014  
**Transaction ID : SA11AI.246339**

Amount of Each Receipt this Period  
300.00

**B. WILLIAM WELCH**  
Full Name (Last, First, Middle Initial)

Mailing Address 205 ROYAL DUBLIN

City WILLIAMSBURG State VA Zip Code 23188

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 18 / 2014  
**Transaction ID : SA11AI.247875**

Amount of Each Receipt this Period  
100.00

**C. CLAY WESTFALL**  
Full Name (Last, First, Middle Initial)

Mailing Address 239 QUIET RIDGE LN

City GRANDVIEW State TN Zip Code 37337

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 11 / 2014  
**Transaction ID : SA11AI.246243**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00

**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 140 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. DR ROBERT WHITE</b>		Date of Receipt
Mailing Address 129 REGENCY DR		<input type="text" value="04"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
CONWAY	SC	29526
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="325.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>

Full Name (Last, First, Middle Initial) <b>B. CAROLYN M WHITE</b>		Date of Receipt
Mailing Address 1414 S 1050 E		<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
OAKLAND CITY	IN	47660
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>

Full Name (Last, First, Middle Initial) <b>C. WILLIAM WHITESIDE</b>		Date of Receipt
Mailing Address 588 LAKE VISTA LN		<input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
TAYLORSVILLE	NC	28681
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="600.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="600.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="800.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 141 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. MR Q T WILBER**

Mailing Address 255 NORTHLAKE DR

City COLDWATER State MI Zip Code 49036

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
04 / 09 / 2014  
**Transaction ID : SA11AI.245802**

Amount of Each Receipt this Period  
150.00

Full Name (Last, First, Middle Initial)  
**B. WALTER WILD**

Mailing Address 41-473 KALANIANAOLE HWY.

City WAIMANALO State HI Zip Code 96795

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
04 / 23 / 2014  
**Transaction ID : SA11AI.257639**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. MR EVERETT M WILLIAMS**

Mailing Address 204 MELODY LN

City FRIENDSWOOD State TX Zip Code 77546

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
04 / 01 / 2014  
**Transaction ID : SA11AI.243417**

Amount of Each Receipt this Period  
70.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	320.00
<b>TOTAL</b> 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 142 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. SHIRLEY WILLIAMS</b>		Date of Receipt
Mailing Address 1434 N. FM 1724		<input type="text" value="04"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
HANKAMERTX	TX	77560
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="600.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Transaction ID : SA11AI.256888		

Full Name (Last, First, Middle Initial) <b>B. SHIRLEY WILLIAMS</b>		Date of Receipt
Mailing Address 1434 N. FM 1724		<input type="text" value="04"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
HANKAMERTX	TX	77560
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="700.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Transaction ID : SA11AI.256903		

Full Name (Last, First, Middle Initial) <b>C. MARGIE WILLIAMSON</b>		Date of Receipt
Mailing Address 17 MEREDITH ROAD		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
SALEM	NH	03079
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
NONE	HOMEMAKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Transaction ID : SA11AI.256751		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="450.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 143 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. MR JOHN WILSON</b>		Date of Receipt
Mailing Address 7239 KENSINGTON CT		<input type="text" value="04"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City State Zip Code UNIVERSITY PARK FL 34201		<b>Transaction ID : SA11AI.244399</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="500.00"/>
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) <b>B. DANIEL SCOTT WILSON</b>		Date of Receipt
Mailing Address PO BOX 2034		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City State Zip Code LAUREL MS 39442		<b>Transaction ID : SA11AI.246905</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="200.00"/>
Name of Employer SELF EMPLOYED	Occupation CPA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>	

Full Name (Last, First, Middle Initial) <b>C. CAROL R. WILSON</b>		Date of Receipt
Mailing Address 2197 SUTTER VIEW LN.		<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City State Zip Code LINCOLN CA 95648		<b>Transaction ID : SA11AI.248748</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5500.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="5700.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 144 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. ZOA W WINTER</b>		Date of Receipt
Mailing Address 4895 HART DR		M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2014
City	State	Zip Code
SAN DIEGO	CA	92116
FEC ID number of contributing federal political committee.	C	Transaction ID : SA11AI.247117
Name of Employer	Occupation	Amount of Each Receipt this Period
INFORMATION REQUESTED	INFORMATION REQUESTED	50.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	350.00	

Full Name (Last, First, Middle Initial) <b>B. KATHRYN WITTMER</b>		Date of Receipt
Mailing Address 3801 HULL RD		M M M / D D D / Y Y Y Y Y Y 04 / 10 / 2014
City	State	Zip Code
HURON	OH	44839
FEC ID number of contributing federal political committee.	C	Transaction ID : SA11AI.246166
Name of Employer	Occupation	Amount of Each Receipt this Period
INFORMATION REQUESTED	INFORMATION REQUESTED	100.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	350.00	

Full Name (Last, First, Middle Initial) <b>C. JO WOLF</b>		Date of Receipt
Mailing Address 1664 LINCOLN AVE		M M M / D D D / Y Y Y Y Y Y 04 / 07 / 2014
City	State	Zip Code
EVANSVILLE	IN	47714
FEC ID number of contributing federal political committee.	C	Transaction ID : SA11AI.245380
Name of Employer	Occupation	Amount of Each Receipt this Period
INFORMATION REQUESTED	INFORMATION REQUESTED	100.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> 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 145 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. MRS KAREN A WRIGHT</b>		Date of Receipt
Mailing Address 1240 GAMBIER RD		<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Zip Code
MOUNT VERNON	OH	43050
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.249065</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
INFORMATION REQUESTED	INFORMATION REQUESTED	<input type="text" value="5000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR JOHN WRIGHT</b>		Date of Receipt
Mailing Address 674 GRAND CANYON DR		<input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
ELIZABETHTOWN	KY	42701
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.250568</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
INFORMATION REQUESTED	INFORMATION REQUESTED	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="205.00"/>	

Full Name (Last, First, Middle Initial) <b>C. FRANNY YEN</b>		Date of Receipt
Mailing Address 27830 ALEUTIA WAY		<input type="text" value="04"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
YORBA LINDA	CA	92887
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.256997</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	HOMEMAKER	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="5275.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 146 OF 219
	<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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. TRACY YOUNG**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 1403

City GUALALA	State CA	Zip Code 95445
-----------------	-------------	-------------------

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

Name of Employer NOT EMPLOYED	Occupation NOT EMPLOYED
----------------------------------	----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2014

**Transaction ID : SA11AI.257584**

Amount of Each Receipt this Period  
100.00

**B. ROBERT YOUNG**  
Full Name (Last, First, Middle Initial)  
Mailing Address 33 BRANCH ST

City SCITUATE	State MA	Zip Code 02066
------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2014

**Transaction ID : SA11AI.257895**

Amount of Each Receipt this Period  
25.00

**C. FRANK ZITZOW**  
Full Name (Last, First, Middle Initial)  
Mailing Address 18808 WHIRLAWAY RD.

City EAGLE RIVER	State AK	Zip Code 99577
---------------------	-------------	-------------------

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 ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2014

**Transaction ID : SA11AI.247668**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<b>TOTAL</b> This Period (last page this line number only).....	318610.50

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
PAC E-MARKETING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.241047**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
PAC E-MARKETING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.241061**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
PAC E-MARKETING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.243157**

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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address WORLD FINANCIAL CENTER

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement  
PAC CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 01 / 2014

Transaction ID : SB21B.220549

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

**B. AMERICAN EXPRESS**

Mailing Address WORLD FINANCIAL CENTER

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement  
PAC CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 01 / 2014

Transaction ID : SB21B.220551

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

**C. AMERICAN EXPRESS**

Mailing Address WORLD FINANCIAL CENTER

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement  
PAC CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 07 / 2014

Transaction ID : SB21B.241046

Amount of Each Disbursement this Period

213.71

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

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

229.61

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address WORLD FINANCIAL CENTER

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement  
PAC CC TRANSACTION FEES

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.241044**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. ASAP, LLC**

Mailing Address PO BOX 19366

City KALAMAZOO State MI Zip Code 49019

Purpose of Disbursement  
PAC STRATEGY CONSULTING

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.241060**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. BIG EYE DIRECT**

Mailing Address 13860 REDSKIN DRIVE

City HERNDON State VA Zip Code 20170

Purpose of Disbursement  
PAC DIRECT MAIL PRODUCTION

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.241062**

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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. BIG EYE DIRECT**

Mailing Address 13860 REDSKIN DRIVE

City HERNDON State VA Zip Code 20170

Purpose of Disbursement  
PAC DIRECT MAIL PRODUCTION

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 21 / 2014

Transaction ID : SB21B.243170

Amount of Each Disbursement this Period

31558.74

Full Name (Last, First, Middle Initial)

**B. KEVIN BROUGHTON**

Mailing Address 631 LIVE OAK DR.

City MADISON State MS Zip Code 39110

Purpose of Disbursement  
PAC MEDIA CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 01 / 2014

Transaction ID : SB21B.220545

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. KEVIN BROUGHTON**

Mailing Address 631 LIVE OAK DR.

City MADISON State MS Zip Code 39110

Purpose of Disbursement  
SEE MEMO

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2014

Transaction ID : SB21B.243159

Amount of Each Disbursement this Period

330.72

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

34389.46

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address 208 S. AKARD STREET

City DALLAS State TX Zip Code 75202

Purpose of Disbursement  
PAC TELEPHONE

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 22 / 2014

Transaction ID : SB21B.243160

Amount of Each Disbursement this Period

177.75

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. KEVIN BROUGHTON**

Mailing Address 631 LIVE OAK DR.

City MADISON State MS Zip Code 39110

Purpose of Disbursement  
PAC MOVING EXPENSES

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 28 / 2014

Transaction ID : SB21B.243183

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**C. KELI CARENDER**

Mailing Address

City State Zip Code

Purpose of Disbursement  
PAC GRASSROOTS CONSULTING

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 23 / 2014

Transaction ID : SB21B.243180

Amount of Each Disbursement this Period

2000.00

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

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

3500.00

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. DARCY CRISP**

Mailing Address 1855 MOUNTAIN TRACE

City CANTON State GA Zip Code 30114

Purpose of Disbursement  
PAC STRATEGIC CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 01 / 2014

Transaction ID : SB21B.220544

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. DIRECT CONCEPTS**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
PAC GRAPHIC DESIGN

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 09 / 2014

Transaction ID : SB21B.241063

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. DIRECT CONCEPTS**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
PAC GRAPHIC DESIGN

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2014

Transaction ID : SB21B.243186

Amount of Each Disbursement this Period

500.00

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

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

4000.00



**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. DONOR BUREAU LLC**

Mailing Address 1900 N. CULPEPPER ST.

City ARLINGTON State VA Zip Code 22207

Purpose of Disbursement  
PAC DONOR SERVICES

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 03 / 2014

Transaction ID : SB21B.220555

Amount of Each Disbursement this Period

448.70

Full Name (Last, First, Middle Initial)

**B. DONOR BUREAU LLC**

Mailing Address 1900 N. CULPEPPER ST.

City ARLINGTON State VA Zip Code 22207

Purpose of Disbursement  
PAC DONOR SERVICES

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 09 / 2014

Transaction ID : SB21B.241064

Amount of Each Disbursement this Period

229.64

Full Name (Last, First, Middle Initial)

**C. DONOR BUREAU LLC**

Mailing Address 1900 N. CULPEPPER ST.

City ARLINGTON State VA Zip Code 22207

Purpose of Disbursement  
PAC DATA SERVICES

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2014

Transaction ID : SB21B.243171

Amount of Each Disbursement this Period

196.23

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

874.57

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. DONOR BUREAU LLC**

Mailing Address 1900 N. CULPEPPER ST.

City ARLINGTON State VA Zip Code 22207

Purpose of Disbursement  
PAC DONOR SERVICES

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2014

Transaction ID : SB21B.243187

Amount of Each Disbursement this Period

183.40

Full Name (Last, First, Middle Initial)

**B. FIRST VIRGINIA COMMUNITY BANK**

Mailing Address 11325 RANDOM HILLS ROAD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
PAC BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2014

Transaction ID : SB21B.220552

Amount of Each Disbursement this Period

177.23

Full Name (Last, First, Middle Initial)

**C. FIRST VIRGINIA COMMUNITY BANK**

Mailing Address 11325 RANDOM HILLS ROAD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
PAC BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2014

Transaction ID : SB21B.220548

Amount of Each Disbursement this Period

9.89

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

370.52

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. FIRST VIRGINIA COMMUNITY BANK**

Mailing Address 11325 RANDOM HILLS ROAD

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
PAC BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB21B.220550

Amount of Each Disbursement this Period

7	2	4	.	1	8
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. MICHAEL FLYNN**

Mailing Address 1508 RUSSELL ROAD

City State Zip Code  
ALEXANDRIA VA 22301

Purpose of Disbursement  
PAC STRATEGY CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB21B.243126

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. GEB INTERNATIONAL INC.**

Mailing Address 710 E. NORTHWAY LANE

City State Zip Code  
ATLANTA GA 30342

Purpose of Disbursement  
PAC SURVEYS/RESEARCH

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB21B.243156

Amount of Each Disbursement this Period

6	2	6	5	2	6	.	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

6	2	6	5	2	6	.	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

6	2	6	5	2	6	.	0	0
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**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. GLOBAL PAYMENTS**

Mailing Address 10 GLENLAKE PARKWAY NE

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement  
PAC CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 / 02 / 2014

Transaction ID : SB21B.241045

Amount of Each Disbursement this Period

1877.68

Full Name (Last, First, Middle Initial)

**B. GLOBAL PAYMENTS**

Mailing Address 10 GLENLAKE PARKWAY NE

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement  
PAC CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 / 02 / 2014

Transaction ID : SB21B.241043

Amount of Each Disbursement this Period

1058.94

Full Name (Last, First, Middle Initial)

**C. GLOBAL PAYMENTS**

Mailing Address 10 GLENLAKE PARKWAY NE

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement  
PAC CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 / 02 / 2014

Transaction ID : SB21B.241042

Amount of Each Disbursement this Period

48.00

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

2984.62

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. INTEGRAM**

Mailing Address 22695 COMMERCE CENTER COURT

City DULLES State VA Zip Code 20166

Purpose of Disbursement  
PAC MAILING & PRINTING

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 03 / 2014

Transaction ID : SB21B.220556

Amount of Each Disbursement this Period

41268.21

Full Name (Last, First, Middle Initial)

**B. INTEGRAM**

Mailing Address 22695 COMMERCE CENTER COURT

City DULLES State VA Zip Code 20166

Purpose of Disbursement  
PAC POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 03 / 2014

Transaction ID : SB21B.220554

Amount of Each Disbursement this Period

5726.25

Full Name (Last, First, Middle Initial)

**C. INTEGRAM**

Mailing Address 22695 COMMERCE CENTER COURT

City DULLES State VA Zip Code 20166

Purpose of Disbursement  
PAC POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 09 / 2014

Transaction ID : SB21B.241065

Amount of Each Disbursement this Period

6072.14

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

53066.60

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. INTEGRAM**

Mailing Address 22695 COMMERCE CENTER COURT

City DULLES State VA Zip Code 20166

Purpose of Disbursement  
PAC DIRECT MAIL PRODUCTION

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 17 / 2014

Transaction ID : SB21B.243169

Amount of Each Disbursement this Period

97299.65

Full Name (Last, First, Middle Initial)

**B. INTEGRAM**

Mailing Address 22695 COMMERCE CENTER COURT

City DULLES State VA Zip Code 20166

Purpose of Disbursement  
PAC POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 22 / 2014

Transaction ID : SB21B.243168

Amount of Each Disbursement this Period

6543.67

Full Name (Last, First, Middle Initial)

**C. INTEGRAM**

Mailing Address 22695 COMMERCE CENTER COURT

City DULLES State VA Zip Code 20166

Purpose of Disbursement  
PAC POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2014

Transaction ID : SB21B.243188

Amount of Each Disbursement this Period

5472.78

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

109316.10

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. MRS. JENNIFER MARTIN**

Mailing Address 2295 TOWNE LAKE PARKWAY  
STE. 116-328

City WOODSTOCK State GA Zip Code 30189

Purpose of Disbursement  
PAC STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 01 / 2014

Transaction ID : SB21B.220543

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

**B. MDI IMAGING & MAIL**

Mailing Address 21955 CASCADES PARKWAY

City DULLES State VA Zip Code 20166

Purpose of Disbursement  
PAC DIRECT MAIL PRODUCTION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 09 / 2014

Transaction ID : SB21B.241066

Amount of Each Disbursement this Period

4838.91

Full Name (Last, First, Middle Initial)

**C. MDI IMAGING & MAIL**

Mailing Address 21955 CASCADES PARKWAY

City DULLES State VA Zip Code 20166

Purpose of Disbursement  
PAC DIRECT MAIL PRODUCTION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 21 / 2014

Transaction ID : SB21B.243172

Amount of Each Disbursement this Period

1042.36

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

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

20881.27

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. KEVIN L. MOONEYHAN</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 145 EAGLE GLEN DR.		<b>Transaction ID : SB21B.220546</b>
City WOODSTOCK	State GA	
Purpose of Disbursement PAC STRATEGIC CONSULTING		Amount of Each Disbursement this Period 2000.00
Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input 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>B. LINDA H. PARKER</b>		Date of Disbursement MM / DD / YYYY 04 / 22 / 2014
Mailing Address 2021 CRESTHAVEN WALK		<b>Transaction ID : SB21B.243163</b>
City WOODSTOCK	State GA	
Purpose of Disbursement SEE MEMO		Amount of Each Disbursement this Period 2168.00
Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input 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>C. DELTA AIRLINES</b>		Date of Disbursement MM / DD / YYYY 04 / 22 / 2014
Mailing Address 1030 DELTA BLVD.		<b>Transaction ID : SB21B.243164</b>
City ATLANTA	State GA	
Purpose of Disbursement PAC AIRFARE		Amount of Each Disbursement this Period 2168.00
Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input 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]

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4168.00
<b>TOTAL</b> 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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. LINDA H. PARKER**

Mailing Address 2021 CRESTHAVEN WALK

City WOODSTOCK State GA Zip Code 30189

Purpose of Disbursement  
PAC FIELD CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 24 / 2014

Transaction ID : SB21B.243181

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. PATRIOT DATA SERVICES**

Mailing Address 44845 FALCON PL  
STE. 101A

City DULLES State VA Zip Code 20166

Purpose of Disbursement  
PAC DATA WORK

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 03 / 2014

Transaction ID : SB21B.220557

Amount of Each Disbursement this Period

1087.04

Full Name (Last, First, Middle Initial)

**C. PATRIOT DATA SERVICES**

Mailing Address 44845 FALCON PL  
STE. 101A

City DULLES State VA Zip Code 20166

Purpose of Disbursement  
PAC DATA WORK

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 09 / 2014

Transaction ID : SB21B.241067

Amount of Each Disbursement this Period

2056.30

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

5143.34

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. PATRIOT DATA SERVICES**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		21		2014

Mailing Address 44845 FALCON PL  
STE. 101A

**Transaction ID : SB21B.243173**

City DULLES State VA Zip Code 20166

Amount of Each Disbursement this Period

551.65
--------

Purpose of Disbursement  
PAC DATA SERVICES

001
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. PATRIOT DATA SERVICES**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2014

Mailing Address 44845 FALCON PL  
STE. 101A

**Transaction ID : SB21B.243189**

City DULLES State VA Zip Code 20166

Amount of Each Disbursement this Period

1923.34
---------

Purpose of Disbursement  
PAC DATA WORK

001
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. PROFESSIONAL DATA SERVICES INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		22		2014

Mailing Address 2470 DANIELL'S BRIDGE ROAD  
STE. 121

**Transaction ID : SB21B.243165**

City ATHENS State GA Zip Code 30606

Amount of Each Disbursement this Period

6028.10
---------

Purpose of Disbursement  
PAC COMPLIANCE CONSULTING

001
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

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

8503.09
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**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. ROBERTSON MAILING LIST COMPANY**

Mailing Address 21955 CASCADES PARKWAY

City DULLES State VA Zip Code 20166

Purpose of Disbursement  
PAC LIST RENTAL

001

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  
04 / 03 / 2014

Transaction ID : SB21B.220558

Amount of Each Disbursement this Period

5726.33

Full Name (Last, First, Middle Initial)

**B. ROBERTSON MAILING LIST COMPANY**

Mailing Address 21955 CASCADES PARKWAY

City DULLES State VA Zip Code 20166

Purpose of Disbursement  
PAC LIST RENTAL

001

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  
04 / 09 / 2014

Transaction ID : SB21B.241068

Amount of Each Disbursement this Period

2311.82

Full Name (Last, First, Middle Initial)

**C. ROBERTSON MAILING LIST COMPANY**

Mailing Address 21955 CASCADES PARKWAY

City DULLES State VA Zip Code 20166

Purpose of Disbursement  
PAC LIST RENTAL

001

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  
04 / 21 / 2014

Transaction ID : SB21B.243174

Amount of Each Disbursement this Period

2346.84

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

10384.99

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. ROBERTSON MAILING LIST COMPANY**

Mailing Address 21955 CASCADES PARKWAY

City DULLES State VA Zip Code 20166

Purpose of Disbursement  
PAC LIST RENTAL

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2014

Transaction ID : SB21B.243190

Amount of Each Disbursement this Period

3100.86

Full Name (Last, First, Middle Initial)

**B. SHIRLEY & BANISTER PUBLIC AFFAIRS**

Mailing Address 122 SOUTH PATRICK STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC PUBLIC RELATIONS CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 07 / 2014

Transaction ID : SB21B.241048

Amount of Each Disbursement this Period

6745.20

Full Name (Last, First, Middle Initial)

**C. SHONDA WERRY, LLC**

Mailing Address 1025 FIRST STREET SE UNIT 1007

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAC STRATEGIC CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2014

Transaction ID : SB21B.220547

Amount of Each Disbursement this Period

4480.00

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

14326.06

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. SHONDA WERRY, LLC**

Mailing Address 1025 FIRST STREET SE UNIT 1007

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
SEE MEMO

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.241049**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. HILTON HOTELS**

Mailing Address 7930 JONES BRAND DRIVE

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement  
PAC LODGING

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.241050**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES**

Mailing Address 233 S. WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
PAC AIRFARE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.241051**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. HILTON HOTELS**

Mailing Address 7930 JONES BRAND DRIVE

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement  
PAC MEETING EXPENSE

001

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
04	/	07	/	2014

Transaction ID : SB21B.241053

Amount of Each Disbursement this Period

40.71
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. SOUTHWEST PUBLISHING & MAILING**

Mailing Address 2600 NEW TOPEKA BLVD.

City TOPEKA State KS Zip Code 66617

Purpose of Disbursement  
PAC DIRECT MAIL PRODUCTION

001

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
04	/	09	/	2014

Transaction ID : SB21B.241069

Amount of Each Disbursement this Period

4885.26
---------

Full Name (Last, First, Middle Initial)

**C. SOUTHWEST PUBLISHING & MAILING**

Mailing Address 2600 NEW TOPEKA BLVD.

City TOPEKA State KS Zip Code 66617

Purpose of Disbursement  
PAC POSTAGE

001

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
04	/	11	/	2014

Transaction ID : SB21B.243124

Amount of Each Disbursement this Period

5367.03
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

10252.29
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**TOTAL** This Period (last page this line number only)..... ▶

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**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST PUBLISHING & MAILING**

Mailing Address 2600 NEW TOPEKA BLVD.

City TOPEKA State KS Zip Code 66617

Purpose of Disbursement  
PAC POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2014

Transaction ID : SB21B.243191

Amount of Each Disbursement this Period

7466.88

Full Name (Last, First, Middle Initial)

**B. STRATEGIC FUNDRAISING**

Mailing Address 7800 3RD STREET N STE. 900

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement  
PAC LIST RENTAL

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 03 / 2014

Transaction ID : SB21B.220560

Amount of Each Disbursement this Period

37412.36

Full Name (Last, First, Middle Initial)

**C. STRATEGIC FUNDRAISING**

Mailing Address 7800 3RD STREET N STE. 900

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement  
PAC LIST RENTAL

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 09 / 2014

Transaction ID : SB21B.241072

Amount of Each Disbursement this Period

12239.21

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

57118.45

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. STRATEGIC FUNDRAISING**

Mailing Address 7800 3RD STREET N STE. 900

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement  
PAC LIST RENTAL

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2014

Transaction ID : SB21B.243178

Amount of Each Disbursement this Period

9800.00

Full Name (Last, First, Middle Initial)

**B. STRATEGIC FUNDRAISING**

Mailing Address 7800 3RD STREET N STE. 900

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement  
PAC LIST RENTAL

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2014

Transaction ID : SB21B.243185

Amount of Each Disbursement this Period

65625.20

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 140 SECOND STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
PAC CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 06 / 2014

Transaction ID : SB21B.241041

Amount of Each Disbursement this Period

383.22

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

75808.42

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 140 SECOND STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
PAC CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 13 / 2014

Transaction ID : SB21B.243125

Amount of Each Disbursement this Period

987.98

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 140 SECOND STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
PAC CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 20 / 2014

Transaction ID : SB21B.243153

Amount of Each Disbursement this Period

1446.04

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 140 SECOND STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
PAC CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 27 / 2014

Transaction ID : SB21B.243182

Amount of Each Disbursement this Period

912.24

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

3346.26

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 140 SECOND STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
PAC CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	4

Transaction ID : SB21B.243274

Amount of Each Disbursement this Period

9	5	7	.	8	5
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. SUNTRUST BANK**

Mailing Address PO BOX 4418

City ATLANTA State GA Zip Code 30302

Purpose of Disbursement  
PAC BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	4

Transaction ID : SB21B.243155

Amount of Each Disbursement this Period

1	6	7	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. TAYLOR ENGLISH DUMA LLP**

Mailing Address 1600 PARKWOOD CIRCLE  
STE. 400

City ATLANTA State GA Zip Code 30339

Purpose of Disbursement  
PAC LEGAL FEES

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB21B.243166

Amount of Each Disbursement this Period

2	9	8	.	0	0
---	---	---	---	---	---

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

1	4	2	.	8	5
---	---	---	---	---	---

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

1	4	2	.	8	5
---	---	---	---	---	---

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. TEA PARTY PATRIOTS**

Mailing Address 1025 ROSE CREEK DRIVE  
STE. 620-322

City WOODSTOCK State GA Zip Code 30189

Purpose of Disbursement  
SEE MEMO

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 07 / 2014

Transaction ID : SB21B.241058

Amount of Each Disbursement this Period

342.00

Full Name (Last, First, Middle Initial)

**B. DELTA AIRLINES**

Mailing Address 1030 DELTA BLVD.

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
PAC AIRFARE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 07 / 2014

Transaction ID : SB21B.241059

Amount of Each Disbursement this Period

342.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. THE RICHARD NORMAN COMPANY**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 360

City LANSLOWNE State VA Zip Code 20176

Purpose of Disbursement  
PAC DIRECT MAIL FUNDRAISING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 03 / 2014

Transaction ID : SB21B.220559

Amount of Each Disbursement this Period

32055.92

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

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

32397.92

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. THE RICHARD NORMAN COMPANY**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 360

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
PAC DIRECT MAIL FUNDRAISING

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

**04** / **21** / **2014**

**Transaction ID : SB21B.243175**

Amount of Each Disbursement this Period

**21559.13**

Full Name (Last, First, Middle Initial)

**B. THE RICHARD NORMAN COMPANY**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 360

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
PAC DIRECT MAIL FUNDRAISING

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

**04** / **30** / **2014**

**Transaction ID : SB21B.243192**

Amount of Each Disbursement this Period

**7124.04**

Full Name (Last, First, Middle Initial)

**C. TRI-STATE ENVELOPE CORPORATION**

Mailing Address PO BOX 443

City BETTSVILLE State MD Zip Code 20704

Purpose of Disbursement  
PAC PRINTING

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

**04** / **09** / **2014**

**Transaction ID : SB21B.241070**

Amount of Each Disbursement this Period

**7135.54**

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

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

**35818.71**

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. VALLEY PRESS INC**

Mailing Address 5 E MONTGOMERY AVE

City BALA CYNWYD State PA Zip Code 19004

Purpose of Disbursement  
PAC DIRECT MAIL PRODUCTION

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB21B.241071

Amount of Each Disbursement this Period

1	0	5	2	8	.	2	7
---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. VALLEY PRESS INC**

Mailing Address 5 E MONTGOMERY AVE

City BALA CYNWYD State PA Zip Code 19004

Purpose of Disbursement  
PAC PRINTING & MAILING

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	4

Transaction ID : SB21B.243193

Amount of Each Disbursement this Period

1	0	1	5	7	.	2	7
---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. WASHINGTON INTELLIGENCE BUREAU**

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
PAC CAGING & ESCROW

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB21B.243177

Amount of Each Disbursement this Period

6	6	0	3	.	5	4
---	---	---	---	---	---	---

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

2	7	2	8	9	.	0	8
---	---	---	---	---	---	---	---

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

2	7	2	8	9	.	0	8
---	---	---	---	---	---	---	---

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. WASHINGTON INTELLIGENCE BUREAU**

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
PAC POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB21B.243176

Amount of Each Disbursement this Period

1	4	0	1	.	0	7
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. WASHINGTON INTELLIGENCE BUREAU**

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
PAC CAGING & ESCROW

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB21B.243179

Amount of Each Disbursement this Period

3	6	5	0	.	2	4
---	---	---	---	---	---	---

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	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--	--	--

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

5	0	5	1	.	3	1
---	---	---	---	---	---	---

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

6	4	6	1	6	1	0	4
---	---	---	---	---	---	---	---

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 175 OF 219
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CAPITAL RESOURCES, INC.</b>	Nature of Debt (Purpose): IE-BRANNON/SASSE-TELEMARKETING-SEE LINE 24
Mailing Address 700 E. PLEASANT ST.	
City State Zip Code BROOKLYN IA 52211	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.5</b>	
Amount Incurred This Period 3642.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 3642.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>TELEPHONE TOWN HALL MEETING INC.</b>	Nature of Debt (Purpose): IE-BRANNON/SASSE-TELEMARKETING-SEE LINE 24
Mailing Address 958 CONEFLOWER DR.	
City State Zip Code GOLDEN CO 80401	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.6</b>	
Amount Incurred This Period 24917.09	Payment This Period 0.00	Outstanding Balance at Close of This Period 24917.09

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>VICTORY MEDIA GROUP</b>	Nature of Debt (Purpose): IE-CLAWSON-TELEMARKETING-SEE LINE 24
Mailing Address 1701 EAST LAKE AVE. STE. 335	
City State Zip Code GLENVIEW IL 60025	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.7</b>	
Amount Incurred This Period 11395.95	Payment This Period 0.00	Outstanding Balance at Close of This Period 11395.95

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	39955.54
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 176 OF 219
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-BRANNON-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.8</b>	
Amount Incurred This Period 250.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-BRANNON-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.9</b>	
Amount Incurred This Period 250.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 250.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-BRANNON-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.10</b>	
Amount Incurred This Period 500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1000.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00



**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 177 OF 219
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-BRANNON-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.11</b>	
Amount Incurred This Period 333.33	Payment This Period 0.00	Outstanding Balance at Close of This Period 333.33

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-BRANNON-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.12</b>	
Amount Incurred This Period 250.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 250.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-BRANNON-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.13</b>	
Amount Incurred This Period 500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1083.33
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 178 OF 219
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-BRANNON-E-MARKETING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.14</b>	
Amount Incurred This Period 1394.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1394.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-LYNCH-CREATIVE FEE
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.15</b>	
Amount Incurred This Period 500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-MCDANIEL-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.16</b>	
Amount Incurred This Period 250.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 250.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	2144.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 179 OF 219
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-MCDANIEL-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.17</b>	
Amount Incurred This Period 250.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-MCDANIEL-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.18</b>	
Amount Incurred This Period 500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-MCDANIEL-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.19</b>	
Amount Incurred This Period 333.34	Payment This Period 0.00	Outstanding Balance at Close of This Period 333.34

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1083.34
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 180 OF 219
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-MCDANIEL-E-MARKETING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.20</b>	
Amount Incurred This Period 1394.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1394.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-MCCLINTOCK-CREATIVE FEES
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.21</b>	
Amount Incurred This Period 500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-MCCLINTOCK-WEB CONTENT
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.22</b>	
Amount Incurred This Period 100.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 100.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1994.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 181 OF 219
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-BIRMAN-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.23</b>	
Amount Incurred This Period 250.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-CLAWSON-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.24</b>	
Amount Incurred This Period 1000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-CLAWSON-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.25</b>	
Amount Incurred This Period 1000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	2250.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 182 OF 219
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-BEVIN-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : SD10.26</b>	
Amount Incurred This Period <input type="text" value="250.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="250.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-BEVIN-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : SD10.27</b>	
Amount Incurred This Period <input type="text" value="250.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="250.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-BEVIN-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : SD10.28</b>	
Amount Incurred This Period <input type="text" value="333.33"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="333.33"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="833.33"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="0.00"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 183 OF 219
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-KING-CREATIVE FEE
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.29</b>	
Amount Incurred This Period 500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-KING-WEB CONTENT
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.30</b>	
Amount Incurred This Period 100.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 100.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-AMASH-WEB CONTENT
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.31</b>	
Amount Incurred This Period 100.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 100.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	700.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 184 OF 219
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-AMASH-CREATIVE FEES
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.32</b>	
Amount Incurred This Period 500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-SCOTT-CREATIVE FEE
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.33</b>	
Amount Incurred This Period 500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-SCOTT-WEB CONTENT
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.34</b>	
Amount Incurred This Period 100.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 100.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1100.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00



**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 185 OF 219
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-SASSE-CREATIVE FEE
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.35</b>	
Amount Incurred This Period 500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-SASSE-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.36</b>	
Amount Incurred This Period 250.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 250.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-SASSE-E-MARKETING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.37</b>	
Amount Incurred This Period 1394.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1394.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	2144.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 186 OF 219
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-SHANNON-CREATIVE FEE
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.38</b>	
Amount Incurred This Period 500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-GOHMERT-CREATIVE FEE
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.39</b>	
Amount Incurred This Period 500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-GOHMERT-WEB CONTENT
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.40</b>	
Amount Incurred This Period 100.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 100.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1100.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 187 OF 219
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-MEADOWS-CREATIVE FEES
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : SD10.41</b>	
Amount Incurred This Period <input type="text" value="500.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="500.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-WHITE-CREATIVE FEES
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : SD10.42</b>	
Amount Incurred This Period <input type="text" value="500.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>	Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>
-------------------------------------------------------------------	-----------------------------------------------------	---------------------------------------------	---------------------------------------------------------------------

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="1000.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="56387.54"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="56387.54"/>

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>04 / 16 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <b>250.00</b>
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.243211</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>04 / 16 / 2014</b>
Purpose of Expenditure COPY WRITING	Category/Type <b>001</b>
Name of Federal Candidate MATTHEW GRISWOLD BEVIN	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> State: <u>KY</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
<b>56250.00</b>	

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>04 / 21 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <b>250.00</b>
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.243212</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>04 / 21 / 2014</b>
Purpose of Expenditure COPY WRITING	Category/Type <b>001</b>
Name of Federal Candidate MATTHEW GRISWOLD BEVIN	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> State: <u>KY</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
<b>56500.00</b>	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>0.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**05 / 20 / 2014**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
------------------------------------------------------------------------	----------------------------------------------------------

Check if  24-hour report    48-hour report    New report    Amends report filed on M M M / D D D / Y Y Y Y Y Y

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> <b>[MEMO ITEM]</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> <b>04 / 30 / 2014</b>	
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350		Amount <span style="border: 1px solid black; padding: 2px;">333.33</span>	
City LANSDOWNE	State VA	Zip Code 20176	<b>Transaction ID : SE.243213</b>
Purpose of Expenditure COPY WRITING	Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> <b>04 / 30 / 2014</b>	
Name of Federal Candidate MATTHEW GRISWOLD BEVIN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House   District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate   State: <u>KY</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">56833.33</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> <b>[MEMO ITEM]</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> <b>04 / 16 / 2014</b>	
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350		Amount <span style="border: 1px solid black; padding: 2px;">250.00</span>	
City LANSDOWNE	State VA	Zip Code 20176	<b>Transaction ID : SE.243194</b>
Purpose of Expenditure COPY WRITING	Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> <b>04 / 16 / 2014</b>	
Name of Federal Candidate GREGORY JOSEPH BRANNON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House   District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate   State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">8759.24</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">0.00</span>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"></span>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed]   Date M M M / D D D / Y Y Y Y Y Y  
**05 / 20 / 2014**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 21 / 2014
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <span style="border: 1px solid black; padding: 2px;">250.00</span>
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.243195</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 21 / 2014
Purpose of Expenditure COPY WRITING	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate GREGORY JOSEPH BRANNON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: 00 State: NC
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">9498.94</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 30 / 2014
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <span style="border: 1px solid black; padding: 2px;">500.00</span>
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.243196</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 30 / 2014
Purpose of Expenditure COPY WRITING	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate GREGORY JOSEPH BRANNON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: 00 State: NC
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">9998.94</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
05 / 20 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEA PARTY PATRIOTS CITIZENS FUND
FEC IDENTIFICATION NUMBER
C C00540898
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
ACTIVE ENGAGEMENT LLC
MEMO ITEM
Mailing Address
44084 RIVERSIDE PARKWAY
STE. 350
City
LANSDOWNE State
VA Zip Code
20176
Purpose of Expenditure
COPY WRITING Category/
Type
001
Name of Federal Candidate
GREGORY JOSEPH BRANNON
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
10332.27

Date of Public Distribution/Dissemination
04 / 30 / 2014
Amount
333.33
Transaction ID : SE.243197
Date of Disbursement or Obligation
04 / 30 / 2014
Office Sought:
House District: 00
President Senate State: NC
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
ACTIVE ENGAGEMENT LLC
MEMO ITEM
Mailing Address
44084 RIVERSIDE PARKWAY
STE. 350
City
LANSDOWNE State
VA Zip Code
20176
Purpose of Expenditure
E-MARKETING Category/
Type
001
Name of Federal Candidate
GREGORY JOSEPH BRANNON
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
11726.27

Date of Public Distribution/Dissemination
04 / 30 / 2014
Amount
1394.00
Transaction ID : SE.243198
Date of Disbursement or Obligation
04 / 30 / 2014
Office Sought:
House District: 00
President Senate State: NC
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MR. PAULA KILGORE [Electronically Filed] Date 05 / 20 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEA PARTY PATRIOTS CITIZENS FUND
FEC IDENTIFICATION NUMBER
C C00540898
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
ACTIVE ENGAGEMENT LLC
MEMO ITEM
Mailing Address
44084 RIVERSIDE PARKWAY
STE. 350
City
LANSDOWNE State
VA Zip Code
20176
Purpose of Expenditure
CREATIVE FEES Category/
Type
001
Name of Federal Candidate
MATT LYNCH Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
500.00

Date of Public Distribution/Dissemination
04 / 15 / 2014
Amount
500.00
Transaction ID : SE.243201
Date of Disbursement or Obligation
04 / 15 / 2014
Office Sought:
House District: 14
Senate State: OH
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
ACTIVE ENGAGEMENT LLC
MEMO ITEM
Mailing Address
44084 RIVERSIDE PARKWAY
STE. 350
City
LANSDOWNE State
VA Zip Code
20176
Purpose of Expenditure
COPY WRITING Category/
Type
001
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
8759.22

Date of Public Distribution/Dissemination
04 / 16 / 2014
Amount
250.00
Transaction ID : SE.243202
Date of Disbursement or Obligation
04 / 16 / 2014
Office Sought:
House District: 00
Senate State: MS
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MR. PAULA KILGORE
[Electronically Filed]
Date 05 / 20 / 2014
Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEA PARTY PATRIOTS CITIZENS FUND
FEC IDENTIFICATION NUMBER
C C00540898
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
ACTIVE ENGAGEMENT LLC
MEMO ITEM
Mailing Address
44084 RIVERSIDE PARKWAY
STE. 350
City
LANSDOWNE State
VA Zip Code
20176
Purpose of Expenditure
COPY WRITING Category/
Type
001
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
9498.92

Date of Public Distribution/Dissemination
04 / 21 / 2014
Amount
250.00
Transaction ID : SE.243203
Date of Disbursement or Obligation
04 / 21 / 2014
Office Sought:
House District: 00
President Senate State: MS
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
ACTIVE ENGAGEMENT LLC
MEMO ITEM
Mailing Address
44084 RIVERSIDE PARKWAY
STE. 350
City
LANSDOWNE State
VA Zip Code
20176
Purpose of Expenditure
COPY WRITING Category/
Type
001
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
9998.92

Date of Public Distribution/Dissemination
04 / 29 / 2014
Amount
500.00
Transaction ID : SE.243204
Date of Disbursement or Obligation
04 / 29 / 2014
Office Sought:
House District: 00
President Senate State: MS
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
MR. PAULA KILGORE
[Electronically Filed]
Date 05 / 20 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEA PARTY PATRIOTS CITIZENS FUND
FEC IDENTIFICATION NUMBER
C C00540898
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
ACTIVE ENGAGEMENT LLC
MEMO ITEM
Mailing Address
44084 RIVERSIDE PARKWAY
STE. 350
City
LANSDOWNE State
VA Zip Code
20176
Purpose of Expenditure
COPY WRITING Category/
Type
001
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
10332.26

Date of Public Distribution/Dissemination
04 / 30 / 2014
Amount
333.34
Transaction ID : SE.243205
Date of Disbursement or Obligation
04 / 30 / 2014
Office Sought:
House District: 00
President Senate State: MS
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
ACTIVE ENGAGEMENT LLC
MEMO ITEM
Mailing Address
44084 RIVERSIDE PARKWAY
STE. 350
City
LANSDOWNE State
VA Zip Code
20176
Purpose of Expenditure
E-MARKETING Category/
Type
001
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
11726.26

Date of Public Distribution/Dissemination
04 / 30 / 2014
Amount
1394.00
Transaction ID : SE.243206
Date of Disbursement or Obligation
04 / 30 / 2014
Office Sought:
House District: 00
President Senate State: MS
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
MR. PAULA KILGORE
[Electronically Filed]
Date 05 / 20 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 09 / 2014
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <span style="border: 1px solid black; padding: 2px;">500.00</span>
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.243207</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 09 / 2014
Purpose of Expenditure CREATIVE FEES	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate THOMAS MCCLINTOCK	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: CA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">500.00</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 09 / 2014
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <span style="border: 1px solid black; padding: 2px;">100.00</span>
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.243208</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 09 / 2014
Purpose of Expenditure WEB CONTENT	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate THOMAS MCCLINTOCK	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: CA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">600.00</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
05 / 20 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEA PARTY PATRIOTS CITIZENS FUND
FEC IDENTIFICATION NUMBER
C C00540898
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
ACTIVE ENGAGEMENT LLC
MEMO ITEM
Mailing Address
44084 RIVERSIDE PARKWAY
STE. 350
City
LANSDOWNE State
VA Zip Code
20176
Purpose of Expenditure
COPY WRITING Category/
Type
001
Name of Federal Candidate
IGOR A BIRMAN Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
8759.21

Date of Public Distribution/Dissemination
04 / 16 / 2014
Amount
250.00
Transaction ID : SE.243209
Date of Disbursement or Obligation
04 / 16 / 2014
Office Sought: House District: 07
State: CA
Disbursement For: Primary General
Other (specify)

Full Name of Payee
ACTIVE ENGAGEMENT LLC
MEMO ITEM
Mailing Address
44084 RIVERSIDE PARKWAY
STE. 350
City
LANSDOWNE State
VA Zip Code
20176
Purpose of Expenditure
COPY WRITING Category/
Type
001
Name of Federal Candidate
CURTIS J CLAWSON Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
13395.95

Date of Public Distribution/Dissemination
04 / 23 / 2014
Amount
2000.00
Transaction ID : SE.243210
Date of Disbursement or Obligation
04 / 23 / 2014
Office Sought: House District: 19
State: FL
Disbursement For: Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
MR. PAULA KILGORE
[Electronically Filed]
Date 05 / 20 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	FEC IDENTIFICATION NUMBER <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>04 / 28 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <b>100.00</b>
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.243214</b> Date of Disbursement or Obligation MM / DD / YYYY <b>04 / 28 / 2014</b>
Purpose of Expenditure WEB CONTENT	Category/Type <b>001</b>
Name of Federal Candidate JUSTIN AMASH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>03</u> State: <u>MI</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>04 / 28 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <b>500.00</b>
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.243215</b> Date of Disbursement or Obligation MM / DD / YYYY <b>04 / 28 / 2014</b>
Purpose of Expenditure CREATIVE FEES	Category/Type <b>001</b>
Name of Federal Candidate JUSTIN AMASH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>03</u> State: <u>MI</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>0.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date **05 / 20 / 2014**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> <b>[MEMO ITEM]</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>04 / 29 / 2014</b>	
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350		Amount <b>500.00</b>	
City LANSDOWNE	State VA	Zip Code 20176	<b>Transaction ID : SE.243216</b>
Purpose of Expenditure CREATIVE FEES	Category/Type 001	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>04 / 29 / 2014</b>	
Name of Federal Candidate TIMOTHY E SCOTT		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>SC</u>
Calendar Year-To-Date Per Election for Office Sought		<b>500.00</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> <b>[MEMO ITEM]</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>04 / 29 / 2014</b>	
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350		Amount <b>100.00</b>	
City LANSDOWNE	State VA	Zip Code 20176	<b>Transaction ID : SE.243217</b>
Purpose of Expenditure WEB CONTENT	Category/Type 001	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>04 / 29 / 2014</b>	
Name of Federal Candidate TIMOTHY E SCOTT		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>SC</u>
Calendar Year-To-Date Per Election for Office Sought		<b>600.00</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>0.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**05 / 20 / 2014**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>04 / 17 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <b>500.00</b>
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.243218</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>04 / 17 / 2014</b>
Purpose of Expenditure CREATIVE FEES	Category/Type <b>001</b>
Name of Federal Candidate BENJAMIN E SASSE	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: <u>00</u> State: <u>NE</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

500.00

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>04 / 21 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <b>250.00</b>
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.243219</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>04 / 21 / 2014</b>
Purpose of Expenditure COPY WRITING	Category/Type <b>001</b>
Name of Federal Candidate BENJAMIN E SASSE	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: <u>00</u> State: <u>NE</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

750.00

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>0.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**05 / 20 / 2014**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>04 / 30 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <b>1394.00</b>
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.243220</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>04 / 30 / 2014</b>
Purpose of Expenditure E-MARKETING	Category/Type <b>001</b>
Name of Federal Candidate BENJAMIN E SASSE	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> State: <u>NE</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
<b>2144.00</b>	

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>04 / 22 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <b>500.00</b>
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.243224</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>04 / 22 / 2014</b>
Purpose of Expenditure CREATIVE FEES	Category/Type <b>001</b>
Name of Federal Candidate STEVE KING	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>04</u> State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
<b>500.00</b>	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>0.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**05 / 20 / 2014**



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>		FEC IDENTIFICATION NUMBER <b>C C00540898</b>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> <b>[MEMO ITEM]</b>		Date of Public Distribution/Dissemination <b>04 / 22 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350		Amount <b>100.00</b>
City LANSDOWNE	State VA	Zip Code 20176
Purpose of Expenditure WEB CONTENT	Category/Type <b>001</b>	Transaction ID : <b>SE.243225</b> Date of Disbursement or Obligation <b>04 / 22 / 2014</b>
Name of Federal Candidate STEVE KING	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>04</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>IA</b>
Calendar Year-To-Date Per Election for Office Sought	<b>600.00</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> <b>[MEMO ITEM]</b>		Date of Public Distribution/Dissemination <b>04 / 24 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350		Amount <b>500.00</b>
City LANSDOWNE	State VA	Zip Code 20176
Purpose of Expenditure CREATIVE FEES	Category/Type <b>001</b>	Transaction ID : <b>SE.243226</b> Date of Disbursement or Obligation <b>04 / 24 / 2014</b>
Name of Federal Candidate T W SHANNON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>OK</b>
Calendar Year-To-Date Per Election for Office Sought	<b>500.00</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>0.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*  
Signature

[Electronically Filed] Date **05 / 20 / 2014**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEA PARTY PATRIOTS CITIZENS FUND
FEC IDENTIFICATION NUMBER
C C00540898
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
ACTIVE ENGAGEMENT LLC
MEMO ITEM
Mailing Address
44084 RIVERSIDE PARKWAY
STE. 350
City
LANSDOWNE State
VA Zip Code
20176
Purpose of Expenditure
CREATIVE FEES Category/
Type
001
Name of Federal Candidate
LOUIE GOHMERT Support
Office Sought: House District: 04
State: TX
Calendar Year-To-Date
Per Election for Office Sought
500.00

Date of Public Distribution/Dissemination
04 / 23 / 2014
Amount
500.00
Transaction ID : SE.243227
Date of Disbursement or Obligation
04 / 23 / 2014
Disbursement For: General
2014

Full Name of Payee
ACTIVE ENGAGEMENT LLC
MEMO ITEM
Mailing Address
44084 RIVERSIDE PARKWAY
STE. 350
City
LANSDOWNE State
VA Zip Code
20176
Purpose of Expenditure
WEB CONTENT Category/
Type
001
Name of Federal Candidate
LOUIE GOHMERT Support
Office Sought: House District: 04
State: TX
Calendar Year-To-Date
Per Election for Office Sought
600.00

Date of Public Distribution/Dissemination
04 / 25 / 2014
Amount
100.00
Transaction ID : SE.243228
Date of Disbursement or Obligation
04 / 25 / 2014
Disbursement For: General
2014

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
MR. PAULA KILGORE
[Electronically Filed]
Date 05 / 20 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEA PARTY PATRIOTS CITIZENS FUND
FEC IDENTIFICATION NUMBER
C C00540898
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
ACTIVE ENGAGEMENT LLC
MEMO ITEM
Mailing Address
44084 RIVERSIDE PARKWAY
STE. 350
City
LANSDOWNE State
VA Zip Code
20176
Purpose of Expenditure
CREATIVE FEES Category/
Type 001
Name of Federal Candidate
MARK R MEADOWS Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought 500.00

Date of Public Distribution/Dissemination
04 / 28 / 2014
Amount
500.00
Transaction ID : SE.243229
Date of Disbursement or Obligation
04 / 28 / 2014
Office Sought: House District: 11
President Senate State: NC
Disbursement For: Primary General
2014 Other (specify)

Full Name of Payee
ACTIVE ENGAGEMENT LLC
MEMO ITEM
Mailing Address
44084 RIVERSIDE PARKWAY
STE. 350
City
LANSDOWNE State
VA Zip Code
20176
Purpose of Expenditure
CREATIVE FEES Category/
Type 001
Name of Federal Candidate
HAYWOOD EDWIN WHITE Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought 500.00

Date of Public Distribution/Dissemination
04 / 30 / 2014
Amount
500.00
Transaction ID : SE.243230
Date of Disbursement or Obligation
04 / 30 / 2014
Office Sought: House District: 07
President Senate State: NC
Disbursement For: Primary General
2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
MR. PAULA KILGORE
[Electronically Filed]
Date 05 / 20 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>CAPITAL RESOURCES, INC.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>04 / 21 / 2014</b>	
Mailing Address 700 E. PLEASANT ST.		Amount <b>489.70</b>	
City <b>BROOKLYN</b>	State <b>IA</b>	Zip Code <b>52211</b>	<b>Transaction ID : SE.243148</b>
Purpose of Expenditure <b>TELEMARKETING</b>	Category/Type <b>001</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>04 / 30 / 2014</b>	
Name of Federal Candidate <b>GREGORY JOSEPH BRANNON</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought <b>9248.94</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>CAPITAL RESOURCES, INC.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>04 / 30 / 2014</b>	
Mailing Address 700 E. PLEASANT ST.		Amount <b>1821.25</b>	
City <b>BROOKLYN</b>	State <b>IA</b>	Zip Code <b>52211</b>	<b>Transaction ID : SE.243200</b>
Purpose of Expenditure <b>TELEMARKETING</b>	Category/Type <b>001</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>04 / 30 / 2014</b>	
Name of Federal Candidate <b>GREGORY JOSEPH BRANNON</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought <b>26006.07</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>489.70</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY  
**05 / 20 / 2014**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>CAPITAL RESOURCES, INC.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>04 / 16 / 2014</b>	
Mailing Address 700 E. PLEASANT ST.		Amount <b>147.74</b>	
City <b>BROOKLYN</b>	State <b>IA</b>	Zip Code <b>52211</b>	Transaction ID : <b>SE.243135</b>
Purpose of Expenditure <b>TELEMARKETING</b>	Category/Type <b>001</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>04 / 30 / 2014</b>	
Name of Federal Candidate <b>MATT LYNCH</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <u>14</u> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought <b>9009.24</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>CAPITAL RESOURCES, INC.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>04 / 21 / 2014</b>	
Mailing Address 700 E. PLEASANT ST.		Amount <b>489.70</b>	
City <b>BROOKLYN</b>	State <b>IA</b>	Zip Code <b>52211</b>	Transaction ID : <b>SE.243149</b>
Purpose of Expenditure <b>TELEMARKETING</b>	Category/Type <b>001</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>04 / 30 / 2014</b>	
Name of Federal Candidate <b>MATT LYNCH</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <u>14</u> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought <b>9498.94</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>637.44</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY  
**05 / 20 / 2014**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>CAPITAL RESOURCES, INC.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 16 / 2014
Mailing Address 700 E. PLEASANT ST.	Amount <span style="border: 1px solid black; padding: 2px;">147.74</span>
City State Zip Code BROOKLYN IA 52211	
Purpose of Expenditure TELEMARKETING	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 30 / 2014
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">8509.22</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>CAPITAL RESOURCES, INC.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 21 / 2014
Mailing Address 700 E. PLEASANT ST.	Amount <span style="border: 1px solid black; padding: 2px;">489.70</span>
City State Zip Code BROOKLYN IA 52211	
Purpose of Expenditure TELEMARKETING	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 30 / 2014
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">9248.92</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">637.44</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MR. PAULA KILGORE

[Electronically Filed]

Signature \_\_\_\_\_ Date M M M / D D D / Y Y Y Y Y Y  
05 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>CAPITAL RESOURCES, INC.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 04 / 16 / 2014
Mailing Address 700 E. PLEASANT ST.	Amount <span style="border: 1px solid black; padding: 2px;">147.74</span>
City State Zip Code BROOKLYN IA 52211	<b>Transaction ID : SE.243143</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 04 / 30 / 2014
Purpose of Expenditure TELEMARKETING	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate THOMAS MCCLINTOCK	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">9109.21</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>CAPITAL RESOURCES, INC.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 04 / 21 / 2014
Mailing Address 700 E. PLEASANT ST.	Amount <span style="border: 1px solid black; padding: 2px;">489.70</span>
City State Zip Code BROOKLYN IA 52211	<b>Transaction ID : SE.243151</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 04 / 30 / 2014
Purpose of Expenditure TELEMARKETING	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate THOMAS MCCLINTOCK	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">9598.91</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">637.44</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 05 / 20 / 2014

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>CAPITAL RESOURCES, INC.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>04 / 16 / 2014</b>	
Mailing Address 700 E. PLEASANT ST.		Amount <b>147.74</b>	
City <b>BROOKLYN</b>	State <b>IA</b>	Zip Code <b>52211</b>	<b>Transaction ID : SE.243147</b>
Purpose of Expenditure <b>TELEMARKETING</b>	Category/Type <b>001</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>04 / 30 / 2014</b>	
Name of Federal Candidate <b>IGOR A BIRMAN</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <u>07</u> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>CA</u>
Calendar Year-To-Date Per Election for Office Sought		<b>8509.21</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>CAPITAL RESOURCES, INC.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>04 / 21 / 2014</b>	
Mailing Address 700 E. PLEASANT ST.		Amount <b>489.70</b>	
City <b>BROOKLYN</b>	State <b>IA</b>	Zip Code <b>52211</b>	<b>Transaction ID : SE.243152</b>
Purpose of Expenditure <b>TELEMARKETING</b>	Category/Type <b>001</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>04 / 30 / 2014</b>	
Name of Federal Candidate <b>IGOR A BIRMAN</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <u>07</u> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>CA</u>
Calendar Year-To-Date Per Election for Office Sought		<b>9248.91</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>637.44</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY  
**05 / 20 / 2014**



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>CAPITAL RESOURCES, INC.</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>04 / 30 / 2014</b>
Mailing Address <b>700 E. PLEASANT ST.</b>	Amount <b>1821.25</b>
City <b>BROOKLYN</b> State <b>IA</b> Zip Code <b>52211</b>	<b>Transaction ID : SE.243222</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>04 / 30 / 2014</b>
Purpose of Expenditure <b>TELEMARKETING</b> Category/Type <b>001</b>	Name of Federal Candidate <b>BENJAMIN E SASSE</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NE</u>
Calendar Year-To-Date Per Election for Office Sought <b>16423.79</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>INTEGRAM</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>04 / 16 / 2014</b>
Mailing Address <b>22695 COMMERCE CENTER COURT</b>	Amount <b>7607.33</b>
City <b>DULLES</b> State <b>VA</b> Zip Code <b>20166</b>	<b>Transaction ID : SE.243129</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>04 / 30 / 2014</b>
Purpose of Expenditure <b>DIRECT MAIL PRODUCTION</b> Category/Type <b>001</b>	Name of Federal Candidate <b>GREGORY JOSEPH BRANNON</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought <b>7649.09</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>7607.33</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE* [Electronically Filed] Date **05 / 20 / 2014**

Signature \_\_\_\_\_

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>INTEGRAM</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 16 / 2014
Mailing Address 22695 COMMERCE CENTER COURT	Amount <span style="border: 1px solid black; padding: 2px;">7607.33</span>
City DULLES State VA Zip Code 20166	<b>Transaction ID : SE.243133</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 30 / 2014
Purpose of Expenditure DIRECT MAIL PRODUCTION	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate MATT LYNCH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">8149.09</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>INTEGRAM</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 16 / 2014
Mailing Address 22695 COMMERCE CENTER COURT	Amount <span style="border: 1px solid black; padding: 2px;">7607.33</span>
City DULLES State VA Zip Code 20166	<b>Transaction ID : SE.243137</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 30 / 2014
Purpose of Expenditure DIRECT MAIL PRODUCTION	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">7649.08</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">15214.66</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 05 / 20 / 2014

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>INTEGRAM</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>04 / 16 / 2014</b>
Mailing Address <b>22695 COMMERCE CENTER COURT</b>	Amount <span style="margin-left: 20px;">7607.32</span>
City <b>DULLES</b> State <b>VA</b> Zip Code <b>20166</b>	<b>Transaction ID : SE.243141</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>04 / 30 / 2014</b>
Purpose of Expenditure <b>DIRECT MAIL PRODUCTION</b> Category/Type <b>001</b>	Name of Federal Candidate <b>THOMAS MCCLINTOCK</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <b>04</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>CA</b>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">8249.07</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>INTEGRAM</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>04 / 16 / 2014</b>
Mailing Address <b>22695 COMMERCE CENTER COURT</b>	Amount <span style="margin-left: 20px;">7607.32</span>
City <b>DULLES</b> State <b>VA</b> Zip Code <b>20166</b>	<b>Transaction ID : SE.243145</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>04 / 30 / 2014</b>
Purpose of Expenditure <b>DIRECT MAIL PRODUCTION</b> Category/Type <b>001</b>	Name of Federal Candidate <b>IGOR A BIRMAN</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <b>07</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>CA</b>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">7649.07</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="margin-left: 20px;">15214.64</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="margin-left: 20px;"></span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="margin-left: 20px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**05 / 20 / 2014**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>PATRIOT DATA SERVICES</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 16 / 2014
Mailing Address 44845 FALCON PL STE. 101A	Amount <span style="border: 1px solid black; padding: 2px;">41.75</span>
City State Zip Code DULLES VA 20166	<b>Transaction ID : SE.243144</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 30 / 2014
Purpose of Expenditure DATA WORK	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate IGOR A BIRMAN	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 07 State: CA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">41.75</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>TELEPHONE TOWN HALL MEETING INC.</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 30 / 2014
Mailing Address 958 CONEFLOWER DR.	Amount <span style="border: 1px solid black; padding: 2px;">12458.55</span>
City State Zip Code GOLDEN CO 80401	<b>Transaction ID : SE.243199</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 30 / 2014
Purpose of Expenditure TELEMARKETING	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate GREGORY JOSEPH BRANNON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: NC
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">24184.82</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">41.75</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
05 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>		FEC IDENTIFICATION NUMBER <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>TELEPHONE TOWN HALL MEETING INC.</b> <b>[MEMO ITEM]</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 30 / 2014	
Mailing Address 958 CONEFLOWER DR.		Amount 12458.54	
City GOLDEN	State CO	Zip Code 80401	Transaction ID : <b>SE.243221</b>
Purpose of Expenditure TELEMARKETING	Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 04 / 30 / 2014	
Name of Federal Candidate BENJAMIN E SASSE	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate	District: 00 State: NE
Calendar Year-To-Date Per Election for Office Sought	14602.54	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>THE RICHARD NORMAN COMPANY</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 16 / 2014	
Mailing Address 44084 RIVERSIDE PARKWAY STE. 360		Amount 712.41	
City LANSDOWNE	State VA	Zip Code 20176	Transaction ID : <b>SE.243130</b>
Purpose of Expenditure SEE MEMO	Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 04 / 30 / 2014	
Name of Federal Candidate GREGORY JOSEPH BRANNON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate	District: 00 State: NC
Calendar Year-To-Date Per Election for Office Sought	8361.50	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	712.41
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY  
05 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>FEDEX</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>04 / 16 / 2014</b>
Mailing Address 1907 MAIN STREET	Amount <b>712.41</b>
City State Zip Code <b>MADISON MS 39110</b>	<b>Transaction ID : SE.259802</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>04 / 30 / 2014</b>
Purpose of Expenditure <b>POSTAGE</b> Category/Type <b>001</b>	Name of Federal Candidate <b>GREGORY JOSEPH BRANNON</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought <b>0.00</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>THE RICHARD NORMAN COMPANY</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>04 / 16 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 360	Amount <b>712.41</b>
City State Zip Code <b>LANSLOWNE VA 20176</b>	<b>Transaction ID : SE.243134</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>04 / 30 / 2014</b>
Purpose of Expenditure <b>SEE MEMO</b> Category/Type <b>001</b>	Name of Federal Candidate <b>MATT LYNCH</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>14</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought <b>8861.50</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>712.41</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
<b>(c) TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**05 / 20 / 2014**

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEA PARTY PATRIOTS CITIZENS FUND
FEC IDENTIFICATION NUMBER
C C00540898
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
FEDEX
MEMO ITEM
Mailing Address
1907 MAIN STREET
City
MADISON State
MS Zip Code
39110
Purpose of Expenditure
POSTAGE Category/
Type
001
Name of Federal Candidate
MATT LYNCH Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
0.00

Date of Public Distribution/Dissemination
04 / 16 / 2014
Amount
712.41
Transaction ID : SE.259801
Date of Disbursement or Obligation
04 / 30 / 2014
Office Sought:
House District: 14
Senate State: OH
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
THE RICHARD NORMAN COMPANY
Mailing Address
44084 RIVERSIDE PARKWAY
STE. 360
City
LANSDOWNE State
VA Zip Code
20176
Purpose of Expenditure
SEE MEMO Category/
Type
001
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
8361.48

Date of Public Distribution/Dissemination
04 / 16 / 2014
Amount
712.40
Transaction ID : SE.243138
Date of Disbursement or Obligation
04 / 30 / 2014
Office Sought:
House District: 00
Senate State: MS
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 712.40
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MR. PAULA KILGORE
[Electronically Filed]
Date
05 / 20 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>FEDEX</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>04 / 16 / 2014</b>
Mailing Address 1907 MAIN STREET	Amount <b>712.40</b>
City State Zip Code <b>MADISON MS 39110</b>	<b>Transaction ID : SE.259800</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>04 / 30 / 2014</b>
Purpose of Expenditure <b>POSTAGE</b>	Category/Type <b>001</b>
Name of Federal Candidate <b>CHRISTOPHER BRIAN MCDANIEL</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought <b>0.00</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>THE RICHARD NORMAN COMPANY</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>04 / 16 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 360	Amount <b>712.40</b>
City State Zip Code <b>LANSDOWNE VA 20176</b>	<b>Transaction ID : SE.243142</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>04 / 30 / 2014</b>
Purpose of Expenditure <b>SEE MEMO</b>	Category/Type <b>001</b>
Name of Federal Candidate <b>THOMAS MCCLINTOCK</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>04</u> State: <u>CA</u>
Calendar Year-To-Date Per Election for Office Sought <b>8961.47</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>712.40</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE* [Electronically Filed] Date **05 / 20 / 2014**

Signature \_\_\_\_\_



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>FEDEX</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>04 / 16 / 2014</b>
Mailing Address 1907 MAIN STREET	Amount <b>712.40</b>
City State Zip Code <b>MADISON MS 39110</b>	<b>Transaction ID : SE.259799</b> Date of Disbursement or Obligation MM / DD / YYYY <b>04 / 30 / 2014</b>
Purpose of Expenditure <b>POSTAGE</b>	Category/Type <b>001</b>
Name of Federal Candidate <b>THOMAS MCCLINTOCK</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <b>04</b> State: <b>CA</b>
Calendar Year-To-Date Per Election for Office Sought <b>0.00</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>THE RICHARD NORMAN COMPANY</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>04 / 16 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 360	Amount <b>712.40</b>
City State Zip Code <b>LANSDOWNE VA 20176</b>	<b>Transaction ID : SE.243146</b> Date of Disbursement or Obligation MM / DD / YYYY <b>04 / 30 / 2014</b>
Purpose of Expenditure <b>SEE MEMO</b>	Category/Type <b>001</b>
Name of Federal Candidate <b>IGOR A BIRMAN</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <b>07</b> State: <b>CA</b>
Calendar Year-To-Date Per Election for Office Sought <b>8361.47</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>712.40</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY **05 / 20 / 2014**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEA PARTY PATRIOTS CITIZENS FUND
FEC IDENTIFICATION NUMBER
C C00540898
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
FEDEX
[MEMO ITEM]
Mailing Address 1907 MAIN STREET
City MADISON State MS Zip Code 39110
Purpose of Expenditure POSTAGE Category/Type 001
Name of Federal Candidate IGOR A BIRMAN [X] Support [ ] Oppose
Calendar Year-To-Date Per Election for Office Sought 0.00

Date of Public Distribution/Dissemination
04 / 16 / 2014
Amount
712.40
Transaction ID : SE.259798
Date of Disbursement or Obligation
04 / 30 / 2014
Office Sought: [X] House District: 07
[ ] President [ ] Senate State: CA
Disbursement For: [X] Primary [ ] General
2014 [ ] Other (specify)

Full Name of Payee
TPPCF STAFF
[MEMO ITEM]
Mailing Address 2295 TOWNE LAKE PKWY. STE. 116-328
City WOODSTOCK State GA Zip Code 30189
Purpose of Expenditure SCRIPT WRITING Category/Type 001
Name of Federal Candidate GREGORY JOSEPH BRANNON [X] Support [ ] Oppose
Calendar Year-To-Date Per Election for Office Sought 26506.07

Date of Public Distribution/Dissemination
04 / 30 / 2014
Amount
500.00
Transaction ID : SE.243244
Date of Disbursement or Obligation
04 / 30 / 2014
Office Sought: [ ] House District: 00
[ ] President [X] Senate State: NC
Disbursement For: [X] Primary [ ] General
2014 [ ] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(c) TOTAL Independent Expenditures.....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
MR. PAULA KILGORE [Electronically Filed] Date 05 / 20 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>TPPCF STAFF</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 30 / 2014
Mailing Address 2295 TOWNE LAKE PKWY. STE. 116-328	Amount 500.00
City State Zip Code WOODSTOCK GA 30189	<b>Transaction ID : SE.243248</b> Date of Disbursement or Obligation MM / DD / YYYY 04 / 30 / 2014
Purpose of Expenditure SCRIPT WRITING	Category/Type 001
Name of Federal Candidate BENJAMIN E SASSE	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: 00 <input type="checkbox"/> President    State: NE
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
	16923.79

Full Name of Payee <b>VICTORY MEDIA GROUP</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 17 / 2014
Mailing Address 1701 EAST LAKE AVE. STE. 335	Amount 11395.95
City State Zip Code GLENVIEW IL 60025	<b>Transaction ID : SE.243127</b> Date of Disbursement or Obligation MM / DD / YYYY 04 / 17 / 2014
Purpose of Expenditure TELEMARKETING	Category/Type 001
Name of Federal Candidate CURTIS J CLAWSON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate    District: 19 <input type="checkbox"/> President    State: FL
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
	11395.95

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	44679.86

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY  
05 / 20 / 2014