

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
2014 JUL 16 AM 11:23
Office Use Only

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

12FE4M5 FEC MAIL CENTER

B, E, R, N, I, E, D, R, A, F, T

ADDRESS (number and street) ▼

P, O, B, O, X, 6, 0, 5

Check if different than previously reported. (ACC)

B, U, R, L, I, N, G, T, O, N, V, T, 05402

2. FEC IDENTIFICATION NUMBER ▼

00555615

CITY ▲ STATE ▲ ZIP CODE ▲

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

Election on M M / D D / Y Y Y Y in the State of

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

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period

01 01 2014 through 03 31 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 CHRISTOPHER PEARSON

Signature of Treasurer

Chris Pearson

Date

07 12 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

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
BERNIE DRAFT

Report Covering the Period: From: 01 01 2014 To: 03 31 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 0	0	0
(b) Cash on Hand at Beginning of Reporting Period.....	0	
(c) Total Receipts (from Line 19).....	3538.42	3538.42
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	3538.42	3538.42
7. Total Disbursements (from Line 31).....	3010.11	3010.11
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	528.31	528.31
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0	

FROM FINANCIAL

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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

BERNIE DRAFT

Report Covering the Period: From: 0 / 1 / 01 / 2014 To: 03 / 31 / 2014

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).....	3050.92	3050.92
(ii) Unitemized.....	487.50	487.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3538.42	3538.42
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	3538.42	3538.42
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	3538.42	3538.42
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	3538.42	3538.42

1104 6N1 10041

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures	459.19	459.19
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	459.19	459.19
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		
24. Independent Expenditures (use Schedule E)	2550.92	2550.92
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3010.11	3010.11
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3010.11	3010.11

NON-FEDERAL

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)	3538.42	3538.42
34. Total Contribution Refunds (from Line 28(d))	,	,
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3538.42	3538.42
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	459.19	459.19
37. Offsets to Operating Expenditures (from Line 15, page 3).....	,	,
38. Net Operating Expenditures (subtract Line 37 from Line 36)	459.19	459.19

WVND4 1 01N11 1W0A1

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

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

FOR LINE NUMBER: PAGE 6 OF 10
(check only one)

<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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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)
BERNIE DRAFT

A. Full Name (Last, First, Middle Initial)
PEARSON, CHRISTOPHER A

Date of Receipt
01 / 03 / 2014

Mailing Address
12 BROOKES AVE

City **BURLINGTON** State **VT** Zip Code **05401**

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

Amount of Each Receipt this Period
500

Name of Employer **PEARSON & COMPANY** Occupation **CONSULTANT**

Receipt For:
 Primary General
 Other (specify) **DRAFT CAMPAIGN**

Aggregate Year-to-Date **3050.92**

B. Full Name (Last, First, Middle Initial)
PEARSON, CHRISTOPHER A

Date of Receipt
02 / 15 / 2014

Mailing Address
12 BROOKES AVE

City **BURLINGTON** State **VT** Zip Code **05401**

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

Amount of Each Receipt this Period
2550.92

Name of Employer **PEARSON & COMPANY** Occupation **CONSULTANT**

Receipt For:
 Primary General
 Other (specify) **DRAFT CAMPAIGN**

Aggregate Year-to-Date **3050.92**

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

Date of Receipt

Mailing Address

City State Zip Code

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

Amount of Each Receipt this Period

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date

SUBTOTAL of Receipts This Page (optional).....	3050.92
TOTAL This Period (last page this line number only).....	3050.92

42041001001

**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)

PAGE 7 OF 10

<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)
BERNIE DRAFT

A. NORTHFIELD SAVINGS BANK		Date of Disbursement 01 / 05 / 2014
Mailing Address PO BOX 347		Amount of Each Disbursement this Period 14.00
City NORTHFIELD	State VT	
Zip Code 05663		
Purpose of Disbursement CHECKS	001	
Candidate Name BERNARD SANDERS		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify) DRAFT CAMPAIGN	
State: District:		

B. VERMONT SECRETARY OF STATE		Date of Disbursement 02 / 04 / 2014
Mailing Address 128 STATE STREET		Amount of Each Disbursement this Period 125
City MONTPELIER	State VT	
Zip Code 05633		
Purpose of Disbursement INCORPORATION FEE	001	
Candidate Name BERNARD SANDERS		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify) DRAFT CAMPAIGN	
State: District:		

C. RITE AID		Date of Disbursement 02 / 10 / 2014
Mailing Address 158 CHERRY STREET		Amount of Each Disbursement this Period 8.54
City BURLINGTON	State VT	
Zip Code 05401		
Purpose of Disbursement OFFICE SUPPLIES	001	
Candidate Name BERNARD SANDERS		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify) DRAFT CAMPAIGN	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	147.54
TOTAL This Period (last page this line number only).....	

FORM 1004 - 02/03

**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)

PAGE 8 OF 10

<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)
BERNIE DRAFT

Full Name (Last, First, Middle Initial) A. FEDEX OFFICE		Date of Disbursement MM / DD / YYYY 02 / 10 / 2014
Mailing Address 199 MAIN STREET		Amount of Each Disbursement this Period 45.75
City BURLINGTON	State VT	
Zip Code 05401		
Purpose of Disbursement COPIES FOR FUNDRAISING		
Candidate Name BERNARD SANDERS		Category/ Type 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) DRAFT CAMPAIGN	
State: District:		

Full Name (Last, First, Middle Initial) B. PEARSON & COMPANY		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 12 BROOKES AVENUE		Amount of Each Disbursement this Period 2550.92
City BURLINGTON	State VT	
Zip Code 05401		
Purpose of Disbursement FACEBOOK ADS		
Candidate Name BERNARD SANDERS		Category/ Type 004
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) DRAFT CAMPAIGN	
State: District:		

Full Name (Last, First, Middle Initial) C. CLICK AND PLEDGE		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 12202 AIRPORT WAY, STE 100		Amount of Each Disbursement this Period 37.04
City BLOOMFIELD	State CO	
Zip Code 80021		
Purpose of Disbursement ONLINE PAYMENT PROCESSING		
Candidate Name BERNARD SANDERS		Category/ Type 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) DRAFT CAMPAIGN	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2633.71
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)

PAGE 9 OF 10

<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)
BERNIE DRAFT

Full Name (Last, First, Middle Initial) A. CLICK AND PLEDGE		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 12202 AIRPORT WAY, STE. 100		Amount of Each Disbursement this Period 24.15	
City BLOOMFIELD	State CO		Zip Code 80021
Purpose of Disbursement ONLINE PAYMENT PROCESSING			Category/ Type 003
Candidate Name BERNARD SANDERS			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) DRAFT CAMPAIGN		
State: District:			
Full Name (Last, First, Middle Initial) B. CHRISTOPHER PEARSON		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 12 BROOKES AVE.		Amount of Each Disbursement this Period 204.71	
City BURLINGTON	State VT		Zip Code 05401
Purpose of Disbursement WEBSITE & PO BOX FEE REIMBURSEMENT			Category/ Type 001
Candidate Name BERNARD SANDERS			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) DRAFT CAMPAIGN		
State: District:			
Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address		Amount of Each Disbursement this Period	
City	State		Zip Code
Purpose of Disbursement			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optional).....		228.86	
TOTAL This Period (last page this line number only).....		3010.11	

1104 - 1104 - 1104

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) BERNIE DRAFT	FEC IDENTIFICATION NUMBER 00555615
--	--

Check if 24-hour report 48-hour report New report Amends report filed on **04 / 15 / 2014**

Full Name of Payee PEARSON & COMPANY		Date of Public Distribution/Dissemination 02 / 14 / 2014	
Mailing Address 12 BROOKES AVENUE		Amount 2550.92	
City BURLINGTON	State VT	Zip Code 05401	Date of Disbursement or Obligation 02 / 14 / 2014
Purpose of Expenditure FACEBOOK ADS		Category/Type 004	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 2550.92		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) DRAFT CAMPAIGN	

Full Name of Payee		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation
Purpose of Expenditure		Category/Type	
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2550.92
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures.....	2550.92


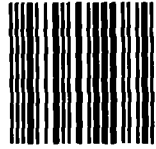
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature *Chris P...* Date **07 / 12 / 2014**

1-800-4-FEDS

BERNIE DRAFT
PO BOX 605
BURLINGTON, VT 05402

U.S. POSTAGE
PAID
BURLINGTON, VT
05401
JUL 12, '14
AMOUNT
\$4.91
00030490-02

1000 20463

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

CERTIFIED MAIL™



7013 1710 0000 8411 0916

FEDERAL ELECTION COMM
999 E STREET NW
WASHINGTON, DC 20463

RECEIVED
2014 JUL 16 AM 11:23
FEC MAIL CENTER

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 7/12/14
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

QSD
PREPARER
(8/2013)

7/16/14
DATE PREPARED