

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="66658.77"/>	<input type="text" value="66658.77"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="122498.77"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="2200.00"/>	<input type="text" value="152540.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="124698.77"/>	<input type="text" value="219198.77"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="28000.00"/>	<input type="text" value="122500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="96698.77"/>	<input type="text" value="96698.77"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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)

Write or Type Committee Name

SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2000.00	149440.00
(ii) Unitemized	200.00	2100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2200.00	151540.00
(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)	2200.00	151540.00
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	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	1000.00
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))..... ▶	2200.00	152540.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2200.00	152540.00

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	28000.00	122500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
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)) ..	28000.00	122500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28000.00	122500.00

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)	2200.00	151540.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2200.00	151540.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	0.00	0.00

**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 12
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Full Name (Last, First, Middle Initial) A. Gary Bevers		Date of Receipt
Mailing Address 21814 Sheffield Gray		<input type="text" value="08"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cypress	TX	77433
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.6701
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Bevers & Co	President	
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. William Kent		Date of Receipt
Mailing Address PO Box 908001		<input type="text" value="08"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
Midland	TX	79708
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.6710
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer	Occupation	
Kent Oil Company	President	
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) C. Barry Schuster		Date of Receipt
Mailing Address 415 Pershing Ave		<input type="text" value="08"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City	State	Zip Code
Indianola	MS	38751
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.6705
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer	Occupation	
Double Quick, Inc.	CFO	
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) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1750.00"/>
TOTAL 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: PAGE 7 OF 12
(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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NAME OF COMMITTEE (In Full)
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

A. Full Name (Last, First, Middle Initial)
Tim Watkins

Mailing Address PO Box 26

City State Zip Code
Westminster MD 21158

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

Name of Employer Occupation
Tevis Oil Co. Business Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 22 / 2014

Transaction ID : SA11AI.6713

Amount of Each Receipt this Period
250.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	2000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Full Name (Last, First, Middle Initial)

A. BILL FOSTER FOR CONGRESS

Mailing Address P.O. BOX 9104

City AURORA State IL Zip Code 60598

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 11

Date of Disbursement

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

Transaction ID : SB23.6691

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. BLUMENTHAL FOR CONNECTICUT

Mailing Address C/O CACACE TUSCH & SANTAGATA
777 SUMMER ST SUITE 103

City STAMFORD State CT Zip Code 06901

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CT District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		11		2014

Transaction ID : SB23.6696

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. CHARLIE DENT FOR CONGRESS

Mailing Address PO Box 442

City Allentown State PA Zip Code 18105

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: PA District: 15

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		05		2014

Transaction ID : SB23.6679

Amount of Each Disbursement this Period

2000.00

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

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

5500.00

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

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NAME OF COMMITTEE (In Full)

SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Full Name (Last, First, Middle Initial)

A. CITIZENS FOR WATERS

Mailing Address 3700 WILSHIRE BLVD., STE. 1050-B

City LOS ANGELES State CA Zip Code 90010

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: CA District: 43

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 12 / 2014

Transaction ID : SB23.6700

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. CONYERS FOR CONGRESS

Mailing Address PO BOX 70980

City WASHINGTON State DC Zip Code 20024

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: MI District: 13

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 11 / 2014

Transaction ID : SB23.6692

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Mailing Address PO BOX 1631

City BALTIMORE State MD Zip Code 21203

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: MD District: 07

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 07 / 2014

Transaction ID : SB23.6690

Amount of Each Disbursement this Period

2000.00

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

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

5500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Full Name (Last, First, Middle Initial)

A. PATRICK HENRY HAYS

Mailing Address 301 MAIN STREET

City NORTH LITTLE ROCK State AR Zip Code 72114

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: AR District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	06	/	2014

Transaction ID : SB23.6688

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. KATHERINE CLARK FOR CONGRESS

Mailing Address PO BOX 361

City MALDEN State MA Zip Code 02148

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: MA District: 05

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	05	/	2014

Transaction ID : SB23.6684

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. MARKEY COMMITTEE; THE

Mailing Address PO BOX 526

City MEDFORD State MA Zip Code 02155

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: MA District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	06	/	2014

Transaction ID : SB23.6689

Amount of Each Disbursement this Period

2000.00

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

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

5000.00

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

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NAME OF COMMITTEE (In Full)

SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Full Name (Last, First, Middle Initial)

A. PETERSON FOR CONGRESS

Mailing Address 26192 FLOYD LAKE POINT ROAD

City State Zip Code
DETROIT LAKES MN 56502

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: MN District: 07

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	12	/	2014

Transaction ID : SB23.6697

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. RON JOHNSON FOR SENATE INC

Mailing Address 219 E WASHINGTON AVE
SUITE 101

City State Zip Code
OSHKOSH WI 54901

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: WI District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	05	/	2014

Transaction ID : SB23.6681

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. SAC PAC

Mailing Address 6380 WILSHIRE BLVD., #1612

City State Zip Code
LOS ANGELES CA 90048

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB23.6678

Amount of Each Disbursement this Period

2000.00

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

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

6000.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Full Name (Last, First, Middle Initial)

A. TOM REED FOR CONGRESS

Mailing Address PO BOX 391

City State Zip Code
GENEVA NY 14456

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	1	4

Transaction ID : SB23.6677

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
2	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. WELCH FOR CONGRESS

Mailing Address PO BOX 1682

City State Zip Code
BURLINGTON VT 05402

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: VT District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	4

Transaction ID : SB23.6680

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
2	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. WHITFIELD FOR CONGRESS COMMITTEE

Mailing Address P.O. BOX 391

City State Zip Code
HOPKINSVILLE KY 42241

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: KY District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	1		2	0	1	4

Transaction ID : SB23.6693

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
2	0	0	0	0	0	0	0	0	0

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

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

6	0	0	0	0	0	0	0	0	0
6	0	0	0	0	0	0	0	0	0

2	8	0	0	0	0	0	0	0	0
2	8	0	0	0	0	0	0	0	0