

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF THE SENATE.
14 OCT 23 PM 3:43

Office Use Only

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

12FE4M5

FRIENDS FOR AN AMERICAN MAJORITY

ADDRESS (number and street)

228 S WASHINGTON ST STE 115

Check if different than previously reported. (ACC)

ALEXANDRIA

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

C C00553016

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT

MT

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on / / in the State of

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

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

Election on / / in the State of

5. Covering Period

/ / through / /

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 Lisa Lisker

Signature of Treasurer

Lisa Lisker

Date

/ /

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

14021140259

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

FRIENDS FOR AN AMERICAN MAJORITY

Report Covering the Period: From:

M M / D D / Y Y Y Y
10 / 01 / 2014

To:

M M / D D / Y Y Y Y
10 / 15 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ..	53300.00	1404280.00
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	2500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...	53300.00	1401780.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	5728.79	99323.26
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	5728.79	99323.26
8. Cash on Hand at Close of Reporting Period (from Line 27)...	42691.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ..	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)...	0.00	

For further information contact:

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

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

14021140260

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 11

Write or Type Committee Name

FRIENDS FOR AN AMERICAN MAJORITY

Report Covering the Period: From:

MM	DD	YYYY
10	01	2014

 To:

MM	DD	YYYY
10	15	2014

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)...	53300.00	1404280.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals .	53300.00	1404280.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs) ..	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	53300.00	1404280.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate...	0.00	0.00
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...	53300.00	1404280.00

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DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	5728.79	99323.26
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	89354.82	1259765.74
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees...	0.00	2500.00
(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 20(a), (b), and (c))...	0.00	2500.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	95083.61	1361589.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	84474.61
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	53300.00
25. SUBTOTAL (add Line 23 and Line 24)...	137774.61
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	95083.61
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	42691.00

14021140262

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only)	PAGE 5 OF 11
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
FRIENDS FOR AN AMERICAN MAJORITY

Full Name (Last, First, Middle Initial) Barbara Banke		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014	
Mailing Address 1045 Alexander Mountain Rd.		Transaction ID : SA11AI.4474	
City Geyersville	State CA	Zip Code 95441	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Jackson Family Wines	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) Barbara Banke		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014	
Mailing Address 1045 Alexander Mountain Rd.		Transaction ID : SA11AI.4476	
City Geyersville	State CA	Zip Code 95441	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Jackson Family Wines	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) Barbara Banke		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014	
Mailing Address 1045 Alexander Mountain Rd.		Transaction ID : SA11AI.4477	
City Geyersville	State CA	Zip Code 95441	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Jackson Family Wines	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 7800.00		

SUBTOTAL of Receipts This Page (optional).....	7800.00
TOTAL This Period (last page this line number only).....	7800.00

14021140263

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

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

FOR LINE NUMBER: PAGE 6 OF 11
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS FOR AN AMERICAN MAJORITY

A. Full Name (Last, First, Middle Initial)
Amy Phelan

Mailing Address **645 Fifth Ave.
21st Floor**

City **New York** State **NY** Zip Code **10022**

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

Name of Employer **N/A** Occupation **Homemaker**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
7950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
10 / 05 / 2014

Transaction ID : **SA11AI.4468**

Amount of Each Receipt this Period
7950.00

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

Mailing Address **645 Fifth Ave.
21st Fl.**

City **New York** State **NY** Zip Code **10022**

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

Name of Employer **MSD Capital** Occupation **Investment Banker**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
7950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
10 / 05 / 2014

Transaction ID : **SA11AI.4470**

Amount of Each Receipt this Period
7950.00

C. Full Name (Last, First, Middle Initial)
Julian H. Robertson Jr.

Mailing Address **150 Central Park South
27th Fl.**

City **New York** State **NY** Zip Code **10019**

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

Name of Employer **Tiger Management** Occupation **Chairman**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
10 / 11 / 2014

Transaction ID : **SA11AI.4483**

Amount of Each Receipt this Period
5200.00

SUBTOTAL of Receipts This Page (optional).....
21100.00

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

14021140264

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

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

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

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NAME OF COMMITTEE (In Full)
FRIENDS FOR AN AMERICAN MAJORITY

A. Full Name (Last, First, Middle Initial)
Robert Rosenkranz

Mailing Address 590 Madison Ave.
30th Fl.

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
Schwab Investements Chairman

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
7800.00

Date of Receipt
MM / DD / YYYY
10 / 11 / 2014

Transaction ID : SA11AI.4479

Amount of Each Receipt this Period
7800.00

B. Full Name (Last, First, Middle Initial)
Charles R. Schwab

Mailing Address PO Box 192861

City State Zip Code
San Francisco CA 94119

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

Name of Employer Occupation
Charles Schwab Co. Executive

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
15600.00

Date of Receipt
MM / DD / YYYY
10 / 11 / 2014

Transaction ID : SA11AI.4485

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Helen O'Neill Schwab

Mailing Address PO Box 620070

City State Zip Code
Woodside CA 94062

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

Name of Employer Occupation
Self Investor

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
7800.00

Date of Receipt
MM / DD / YYYY
10 / 11 / 2014

Transaction ID : SA11AI.4481

Amount of Each Receipt this Period
7800.00

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

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

18200.00

14021140265

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

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

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NAME OF COMMITTEE (In Full)
FRIENDS FOR AN AMERICAN MAJORITY

A. Full Name (Last, First, Middle Initial) Maria SImoff			Date of Receipt MM / DD / YYYY 10 / 10 / 2014		
Mailing Address 66 Sand Spring Rd.			Transaction ID : SA11AI.4472		
City Morristown	State NJ	Zip Code 07960	Amount of Each Receipt this Period 5200.00		
FEC ID number of contributing federal political committee. C					
Name of Employer N/A		Occupation Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00			

B. Full Name (Last, First, Middle Initial) Stephen T. Wheland			Date of Receipt MM / DD / YYYY 10 / 05 / 2014		
Mailing Address 405 Lexington Ave.			Transaction ID : SA11AI.4467		
City New York	State NY	Zip Code 10175	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C					
Name of Employer Blank Rome		Occupation Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 3000.00			

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

SUBTOTAL of Receipts This Page (optional).....	6200.00
TOTAL This Period (last page this line number only).....	53300.00

14021140266

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 11	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS FOR AN AMERICAN MAJORITY

Full Name (Last, First, Middle Initial) A. Amex-Merchant		Date of Disbursement
Mailing Address PO Box 53853		<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
City	State	Zip Code
Phoenix	AZ	85072
Purpose of Disbursement Merchant Fees	<input type="text" value="Category/Type"/>	Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="488.86"/>
Office Sought:	Disbursement For:	Transaction ID : SB17.4466
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. BB&T		Date of Disbursement
Mailing Address 1909 K St., NW		<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
City	State	Zip Code
Washington	DC	20006
Purpose of Disbursement Merchant Fee	<input type="text" value="Category/Type"/>	Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="224.62"/>
Office Sought:	Disbursement For:	Transaction ID : SB17.4493
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. SBR Enterprises LLC		Date of Disbursement
Mailing Address 25023 Algonquin Trail		<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
City	State	Zip Code
Culpeper	VA	22701
Purpose of Disbursement Fundraising Consulting	<input type="text" value="Category/Type"/>	Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="5000.00"/>
Office Sought:	Disbursement For:	Transaction ID : SB17.4436
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	<input type="text" value="5713.48"/>
TOTAL This Period (last page this line number only).....	<input type="text" value="5713.48"/>

14021140267

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
FRIENDS FOR AN AMERICAN MAJORITY

A. COTTON FOR SENATE INC

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 379

City DARDANELLE State AR Zip Code 72834

Purpose of Disbursement
Distribution of net jfc proceeds

Candidate Name
THOMAS COTTON

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: AR District: 00

Date of Disbursement
MM / DD / YYYY
10 / 15 / 2014

Amount of Each Disbursement this Period
24347.76

Transaction ID : SB18.4486

Category/Type
008

B. STEVE DAINES FOR MONTANA

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1598

City HELENA State MT Zip Code 59624

Purpose of Disbursement
Distribution of net jfc proceeds

Candidate Name
STEVEN DAINES

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: MT District: 00

Date of Disbursement
MM / DD / YYYY
10 / 15 / 2014

Amount of Each Disbursement this Period
17715.77

Transaction ID : SB18.4488

Category/Type
008

C. SULLIVAN FOR US SENATE

Full Name (Last, First, Middle Initial)
Mailing Address 3705 ARCTIC BOULEVARD #447

City ANCHORAGE State AK Zip Code 99503

Purpose of Disbursement
Distribution of net jfc proceeds

Candidate Name
DAN SULLIVAN

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: AK District: 00

Date of Disbursement
MM / DD / YYYY
10 / 15 / 2014

Amount of Each Disbursement this Period
22027.65

Transaction ID : SB18.4489

Category/Type
008

SUBTOTAL of Disbursements This Page (optional)..... 64091.18

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

14021140268

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 11	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS FOR AN AMERICAN MAJORITY

Full Name (Last, First, Middle Initial) A. THOM TILLIS COMMITTEE		Date of Disbursement MM / DD / YYYY 10 / 15 / 2014	
Mailing Address PO BOX 2489		Amount of Each Disbursement this Period 25263.64	
City CORNELIUS	State NC	Zip Code 28031	Transaction ID : SB18.4490
Purpose of Disbursement Distribution of net jfc proceeds		Category/ Type 008	
Candidate Name THOM R TILLIS			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NC	District: 00		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY	
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:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY	
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).....	25263.64
TOTAL This Period (last page this line number only).....	89354.82

14021140269

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 10-23-14
Date of Receipt

USPS FIRST CLASS MAIL _____
Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

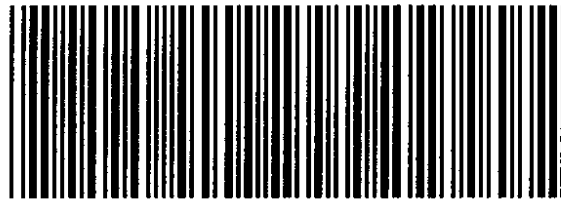
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

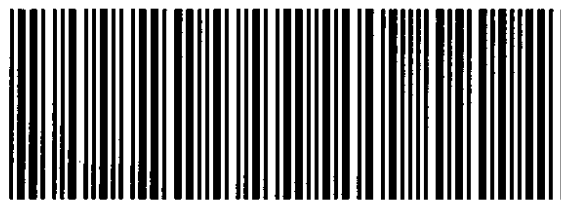
OTHER _____
Date of Receipt or Postmark

PREPARER MN DATE PREPARED 10/23/14

14021140270



SEN PATCH



SEN PATCH

14021140271