

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

HURD FOR CONGRESS

ADDRESS (number and street)

PO BOX 761029

Check if different than previously reported. (ACC)

San Antonio

TX

78245

2. **FEC IDENTIFICATION NUMBER**

C C00545467

CITY

STATE

ZIP CODE

STATE DISTRICT

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

TX

23

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 BRADLEY CRATE

Signature of Treasurer BRADLEY CRATE

[Electronically Filed]

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								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**HURD FOR CONGRESS**

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

	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))....	509251.17	595808.27
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	509251.17	595808.27
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	67564.76	133684.08
(b) Total Offsets to Operating Expenditures (from Line 14).....	8197.01	8197.01
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	59367.75	125487.07
8. Cash on Hand at Close of Reporting Period (from Line 27).....	504890.27	
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).....	140304.22	

**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 3 (Revised 12/2003)

Write or Type Committee Name

**HURD FOR CONGRESS**

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

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).....	305450.00	319625.00
(ii) Unitemized.....	12301.17	13183.27
(iii) TOTAL of contributions from individuals ▶	317751.17	332808.27
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	191500.00	263000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	509251.17	595808.27
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	11941.65	11941.65
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.) .....	8197.01	8197.01
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	529389.83	615946.93

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	67564.76	133684.08
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	35200.00	35200.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	35200.00	35200.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	102764.76	168884.08

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	78265.20
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	529389.83
25. SUBTOTAL (add Line 23 and Line 24).....	607655.03
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	102764.76
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	504890.27

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLES E. AMATO**

Mailing Address 9311 SAN PEDRO AVE  
STE 600

City SAN ANTONIO State TX Zip Code 78216

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

Name of Employer SOUTHWEST BUSINESS CORP. Occupation CHAIRMAN

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11820**

Amount of Each Receipt this Period  
 2700.00

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

Mailing Address 212 BLACKHAWK

City SAN ANTONIO State TX Zip Code 78232

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

Name of Employer SAGE ENERGY Occupation GEOLOGIST

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11759**

Amount of Each Receipt this Period  
 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**MICHAEL AMINI**

Mailing Address 212 BLACKHAWK

City SAN ANTONIO State TX Zip Code 78232

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

Name of Employer SAGE ENERGY Occupation GEOLOGIST

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11760**

Amount of Each Receipt this Period  
 2700.00

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

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

8100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MOLLY AMINI**

Mailing Address **212 BLACKHAWK**

City **SAN ANTONIO** State **TX** Zip Code **78232**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : SA11AI.11761**

Amount of Each Receipt this Period  
**2700.00**

**B.** Full Name (Last, First, Middle Initial)  
**MOLLY AMINI**

Mailing Address **212 BLACKHAWK**

City **SAN ANTONIO** State **TX** Zip Code **78232**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : SA11AI.11762**

Amount of Each Receipt this Period  
**2700.00**

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

Mailing Address **2005 WOOD THRUSH COURT**

City **WESTLAKE** State **TX** Zip Code **76262**

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

Name of Employer **HILLWOOD** Occupation **EXECUTIVE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : SA11AI.11239**

Amount of Each Receipt this Period  
**1000.00**

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

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

**6400.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. FLORA CAMERON ATHERTON CRICHTON**

Mailing Address 315 WESTOVER ROAD

City SAN ANTONIO	State TX	Zip Code 78209
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FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 16 / 2015

**Transaction ID : SA11AI.11249**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**MS. JANA OLSON BAKER**

Mailing Address 304 FOX HALL LN

City SAN ANTONIO	State TX	Zip Code 78213
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FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation ATTORNEY
-----------------------------------	------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 29 / 2015

**Transaction ID : SA11AI.11289**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. REDDY BANDI**

Mailing Address 14948 SNWSHILL DR

City FRISCO	State TX	Zip Code 75035
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FEC ID number of contributing federal political committee. **C**

Name of Employer BIZ TECHNIX, INC.	Occupation IT BUSINESS CONSULTING
---------------------------------------	--------------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11164**

Amount of Each Receipt this Period  
2700.00

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

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

4200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. DARLA BARGER**

Mailing Address 3210 GOLDSBORO ST

City SAN ANTONIO	State TX	Zip Code 78230
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FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : SA11AI.11514**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**TOM BEARD**

Mailing Address PO BOX 668

City ALPINE	State TX	Zip Code 79831
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FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation RANCHER
-----------------------------------	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : SA11AI.11202**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**MICHAEL D BELDON**

Mailing Address P.O. BOX 13380

City SAN ANTONIO	State TX	Zip Code 78213
---------------------	-------------	-------------------

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

Name of Employer BELDON ROOFING	Occupation CEO
------------------------------------	-------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : SA11AI.11263**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN W BELLINGER**

Mailing Address 199 W RHAPSODY DR

City State Zip Code  
SAN ANTONIO TX 78216

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

Name of Employer Occupation  
AGRI-WEST CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 15 / 2015

**Transaction ID : SA11AI.11594**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 199 W RHAPSODY DR

City State Zip Code  
SAN ANTONIO TX 78216

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

Name of Employer Occupation  
AGRI-WEST CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 30 / 2015

**Transaction ID : SA11AI.11319**

Amount of Each Receipt this Period  
500.00

GENERAL DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**GEORGE BLOCK**

Mailing Address 2402 BENRUS BLVD.

City State Zip Code  
SAN ANTONIO TX 78228

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 25 / 2015

**Transaction ID : SA11AI.11537**

Amount of Each Receipt this Period  
1000.00

GENERAL DEBT RETIREMENT

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 10 OF 164  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. DEANNA BODENSTEDT**

Mailing Address 17890 BLANCO RD  
STE 401

City State Zip Code  
SAN ANTONIO TX 78232

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

Name of Employer Occupation  
MUY CONSULTING, INC. MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : SA11AI.11738**

Amount of Each Receipt this Period  
 2500.00  
 GENERAL DEBT RETIREMENT

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

Mailing Address 17890 BLANCO RD  
STE 401

City State Zip Code  
SAN ANTONIO TX 78232

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

Name of Employer Occupation  
NUY CONSULTING, INC. MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : SA11AI.11740**

Amount of Each Receipt this Period  
 2500.00  
 GENERAL DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**MR. HENRY BONILLA**

Mailing Address 215 N CENTER ST  
APT 1304

City State Zip Code  
SAN ANTONIO TX 78202

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

Name of Employer Occupation  
THE NORNAMDY GROUP PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2627.10

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2015

**Transaction ID : SA11AI.11416**

Amount of Each Receipt this Period  
 2500.00  
 GENERAL DEBT RETIREMENT

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. STEPHEN BONNETTE**

Mailing Address **227 BLUFF HOLLOW**

City **SAN ANTONIO** State **TX** Zip Code **78216**

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

Name of Employer **CIVIL ENGINEER** Occupation **PAPE-DAWSON ENGINEERS, INC.**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 21 / 2015**

**Transaction ID : SA11AI.11421**

Amount of Each Receipt this Period  
**250.00**  
 GENERAL DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**JOSE BRIGMAN**

Mailing Address **143 CANDELARIA**

City **HELOTES** State **TX** Zip Code **78023**

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

Name of Employer **SELF-EMPLOYED** Occupation **DENTIST**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2015**

**Transaction ID : SA11AI.11317**

Amount of Each Receipt this Period  
**300.00**  
 GENERAL DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**JOSE BRIGMAN**

Mailing Address **143 CANDELARIA**

City **HELOTES** State **TX** Zip Code **78023**

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

Name of Employer **SELF-EMPLOYED** Occupation **DENTIST**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2015**

**Transaction ID : SA11AI.11318**

Amount of Each Receipt this Period  
**700.00**  
 PRIMARY DEBT RETIREMENT

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

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

**1250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. REGINALD J BROWN**

Mailing Address 317 MANSION DR

City State Zip Code  
ALEXANDRIA VA 22302

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

Name of Employer Occupation  
WILMERHALE PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 29 / 2015

**Transaction ID : SA11AI.11218**

Amount of Each Receipt this Period  
2500.00  
GENERAL DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**J BRUCE BUGG Jr**

Mailing Address 410 ELIZABETH RD

City State Zip Code  
SAN ANTONIO TX 78209

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

Name of Employer Occupation  
SAN ANTONIO CAPITAL & TRUST COMPANY CHAIRMAN

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 12 / 2015

**Transaction ID : SA11AI.11323**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 5815 GABOR DR

City State Zip Code  
SAN ANTONIO TX 78210

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

Name of Employer Occupation  
BANK OF AMERICA BANKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 18 / 2015

**Transaction ID : SA11AI.11507**

Amount of Each Receipt this Period  
250.00

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

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MS. KIRSTEN CHADWICK</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 30 / 2015	
Mailing Address 601 PRESIDENT FORD LN		<b>Transaction ID : SA11AI.11315</b>	
City ALEXANDRIA	State VA	Amount of Each Receipt this Period _____ 500.00 GENERAL DEBT RETIREMENT	
FEC ID number of contributing federal political committee. C			
Name of Employer FIERCE GOVERNMENT RELATIONS	Occupation CONSULTANT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) <b>B. WAN-YU ELISA CHAN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 18 / 2015	
Mailing Address 613 CONTADORA		<b>Transaction ID : SA11AI.11274</b>	
City SAN ANTONIO	State TX	Amount of Each Receipt this Period _____ 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer UNITECH CONSULTING ENGINEERS, INC.	Occupation OWNER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) <b>C. CHARLES E CHEEVER Jr</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 03 / 2015	
Mailing Address 11112 MONMOUTH		<b>Transaction ID : SA11AI.11153</b>	
City SAN ANTONIO	State TX	Amount of Each Receipt this Period _____ 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

<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 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLES E CHEEVER III**

Mailing Address 65 COMSTOCK HILL AVE

City NORWALK State CT Zip Code 06850

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

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2015

**Transaction ID : SA11AI.11617**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**CHARLES E CHEEVER III**

Mailing Address 65 COMSTOCK HILL AVE

City NORWALK State CT Zip Code 06850

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

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2015

**Transaction ID : SA11AI.11618**

Amount of Each Receipt this Period  
2700.00

**C.** Full Name (Last, First, Middle Initial)  
**REGINA CHEEVER**

Mailing Address 65 COMSTOCK HILL AVE

City NORWALK State CT Zip Code 06850

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2015

**Transaction ID : SA11AI.11619**

Amount of Each Receipt this Period  
2700.00

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

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

8100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**REGINA CHEEVER**

Mailing Address 65 COMSTOCK HILL AVE

City NORWALK State CT Zip Code 06850

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 12 / 2015**

**Transaction ID : SA11AI.11660**

Amount of Each Receipt this Period  
**2700.00**

**B.** Full Name (Last, First, Middle Initial)  
**MR. DALTON CHESTER**

Mailing Address 2402 CINCO WOODS

City SAN ANTONIO State TX Zip Code 78259

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

Name of Employer **SELF-EMPLOYED** Occupation **INSURANCE AGENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 26 / 2015**

**Transaction ID : SA11AI.11539**

Amount of Each Receipt this Period  
**1000.00**  
 GENERAL DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**MR. DALTON CHESTER**

Mailing Address 2402 CINCO WOODS

City SAN ANTONIO State TX Zip Code 78259

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

Name of Employer **SELF-EMPLOYED** Occupation **INSURANCE AGENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 08 / 2015**

**Transaction ID : SA11AI.11564**

Amount of Each Receipt this Period  
**1000.00**  
 GENERAL DEBT RETIREMENT

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

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

**4700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. BRIAN CONKLIN**

Mailing Address 1450 EMERSON AVE  
APT G05

City State Zip Code  
MCLEAN VA 22101

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

Name of Employer Occupation  
USAA VP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : SA11AI.11654**

Amount of Each Receipt this Period  
1000.00  
GENERAL DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**MR. SHAWN COOPER**

Mailing Address 7300 S VIEW CT

City State Zip Code  
FAIRFAX STATION VA 22039

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

Name of Employer Occupation  
PG&E UTILITY EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 10 / 2015

**Transaction ID : SA11AI.11571**

Amount of Each Receipt this Period  
250.00  
GENERAL DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**STEPHEN COX**

Mailing Address 4727 DEVON ST.

City State Zip Code  
HOUSTON TX 77027

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

Name of Employer Occupation  
APACHE CORPORATION LAWYER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : SA11AI.11137**

Amount of Each Receipt this Period  
1000.00  
GENERAL DEBT RETIREMENT

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

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

2250.00



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

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

FOR LINE NUMBER: PAGE 17 OF 164  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. J L DAVIS**

Mailing Address 211 N COLORADO

City MIDLAND State TX Zip Code 79701

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

Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 03 / 2015

**Transaction ID : SA11AI.11493**

Amount of Each Receipt this Period  
 2700.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. J L DAVIS**

Mailing Address 211 N COLORADO

City MIDLAND State TX Zip Code 79701

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

Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 03 / 2015

**Transaction ID : SA11AI.11494**

Amount of Each Receipt this Period  
 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**MS. NANCY DAVIS**

Mailing Address 211 N COLORADO

City MIDLAND State TX Zip Code 79701

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

Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 03 / 2015

**Transaction ID : SA11AI.11496**

Amount of Each Receipt this Period  
 2700.00

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

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

8100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. NANCY DAVIS**

Mailing Address **211 N COLORADO**

City **MIDLAND** State **TX** Zip Code **79701**

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

Name of Employer **SELF-EMPLOYED** Occupation **SELF-EMPLOYED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 03 / 2015**

**Transaction ID : SA11AI.11497**

Amount of Each Receipt this Period  
**2700.00**

**B.** Full Name (Last, First, Middle Initial)  
**EUGENE H DAWSON**

Mailing Address **208 N TOWER DR**

City **SAN ANTONIO** State **TX** Zip Code **78232**

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

Name of Employer **PAPE-DAWSON ENGINEERS** Occupation **CIVIL ENGINEER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 03 / 2015**

**Transaction ID : SA11AI.11301**

Amount of Each Receipt this Period  
**2500.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. SAM DAWSON**

Mailing Address **129 TURNBERRY WAY**

City **SAN ANTONIO** State **TX** Zip Code **78230**

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

Name of Employer **PAPE DAWSON** Occupation **CEO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 03 / 2015**

**Transaction ID : SA11AI.11157**

Amount of Each Receipt this Period  
**2500.00**

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

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

**7700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JACK K DILLARD**

Mailing Address 555 E 5TH ST  
# 530

City State Zip Code  
AUSTIN TX 78701

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2015

**Transaction ID : SA11AI.11332**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**SUJEETH DRAKSHARAM**

Mailing Address 3100 TIMMONS LN  
500

City State Zip Code  
HOUSTON TX 77027

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

Name of Employer Occupation  
SIRRUS ENGINEERS, INC. ENGINEER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11173**

Amount of Each Receipt this Period  
1000.00

GENERAL DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**MR. ALAN DREEBEN**

Mailing Address 200 PATTERSON  
#1008

City State Zip Code  
SAN ANTONIO TX 78209

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

Name of Employer Occupation  
REPUBLICAN NATIONAL DISTRIBUTING DIRECTOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2015

**Transaction ID : SA11AI.11312**

Amount of Each Receipt this Period  
2500.00

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

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ALAN DREEBEN**

Mailing Address 200 PATTERSON #1008

City SAN ANTONIO State TX Zip Code 78209

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

Name of Employer REPUBLICAN NATIONAL DISTRIBUTING Occupation DIRECTOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 16 / 2015

**Transaction ID : SA11AI.11283**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**MS. BARBARA DREEBEN**

Mailing Address 200 PATTERSON #1008

City SAN ANTONIO State TX Zip Code 78209

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

Name of Employer HOME MAKER Occupation HOME MAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2015

**Transaction ID : SA11AI.11313**

Amount of Each Receipt this Period  
**2500.00**

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

Mailing Address 200 PATTERSON #1008

City SAN ANTONIO State TX Zip Code 78209

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

Name of Employer HOME MAKER Occupation HOME MAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 16 / 2015

**Transaction ID : SA11AI.11285**

Amount of Each Receipt this Period  
**200.00**

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

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

**2900.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

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

Mailing Address 340 ARCADIA PLACE

City State Zip Code  
SAN ANTONIO TX 78209

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

Name of Employer Occupation  
ALAMO ENT ASSOCIATES SURGEON

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 11 / 2015

**Transaction ID : SA11AI.11609**

Amount of Each Receipt this Period  
500.00  
GENERAL DEBT RETIREMENT

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

Mailing Address 315 TERRELL ROAD

City State Zip Code  
SAN ANTONIO TX 78209

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

Name of Employer Occupation  
FROST BANK CHAIRMAN

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 03 / 2015

**Transaction ID : SA11AI.11628**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. SIMON FALIC**

Mailing Address 6100 HOLLYWOOD BLVD  
STE 700

City State Zip Code  
HOLLYWOOD FL 33024

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

Name of Employer Occupation  
DUTY FREE AMERICAS CHAIRMAN

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 03 / 2015

**Transaction ID : SA11AI.11491**

Amount of Each Receipt this Period  
2500.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. HUGH A FITZSIMONS JR**

Mailing Address PO BOX 130353

City HOUSTON State TX Zip Code 77219

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2015

**Transaction ID : SA11AI.11670**

Amount of Each Receipt this Period  
 2500.00  
 GENERAL DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**MR. HUGH A FITZSIMONS JR**

Mailing Address PO BOX 130353

City HOUSTON State TX Zip Code 77219

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2015

**Transaction ID : SA11AI.11671**

Amount of Each Receipt this Period  
 2500.00  
 PRIMARY DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**MR. HUGH A FITZSIMONS JR**

Mailing Address PO BOX 130353

City HOUSTON State TX Zip Code 77219

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11822**

Amount of Each Receipt this Period  
 2600.00

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

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

7600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. HUGH A FITZSIMONS JR**

Mailing Address PO BOX 130353

City HOUSTON State TX Zip Code 77219

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11823**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**ISRAEL FOGIEL**

Mailing Address 10003 NW MILITARY HWY  
STE 2201

City SAN ANTONIO State TX Zip Code 78231

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

Name of Employer GREAT AMERICAN COMPANIES Occupation PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : SA11AI.11322**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**L F FRANCIS**

Mailing Address 500 N MESA

City EL PASO State TX Zip Code 79901

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

Name of Employer WESTSTAR BANK Occupation BANKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11559**

Amount of Each Receipt this Period  
2700.00

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

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

5550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. HOLLOWAY FROST**

Mailing Address PO BOX 667

City HOUSTON State TX Zip Code 77001

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2015

**Transaction ID : SA11AI.11521**

Amount of Each Receipt this Period  
 2700.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. HOLLOWAY FROST**

Mailing Address PO BOX 667

City HOUSTON State TX Zip Code 77001

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2015

**Transaction ID : SA11AI.11522**

Amount of Each Receipt this Period  
 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**SANDY GALVAN**

Mailing Address 14407 DARK STAR

City SAN ANTONIO State TX Zip Code 78248

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

Name of Employer ARDAGA AND ASSOCIATES Occupation SELF-EMPLOYED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 03 / 2015

**Transaction ID : SA11AI.11345**

Amount of Each Receipt this Period  
 500.00  
 GENERAL DEBT RETIREMENT

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

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

5900.00



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

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

FOR LINE NUMBER: PAGE 25 OF 164  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

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

Mailing Address 12111 WINDEMERE

City State Zip Code  
SAN ANTONIO TX 78230

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

Name of Employer Occupation  
EDMUNDO O. GARCIA, MD OFFICE MANAGER

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11591**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**NOE GARCIA**

Mailing Address 913 N LONGFELLOW ST

City State Zip Code  
ARLINGTON VA 22205

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

Name of Employer Occupation  
MCBEE STRATEGIC, LLC COMMUNICATION AND ADVOCACY

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11146**

Amount of Each Receipt this Period  
1000.00  
GENERAL DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**MS. BONNIE L GILLEY**

Mailing Address 4 KINGHURST

City State Zip Code  
SAN ANTONIO TX 78248

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 03 / 2015

**Transaction ID : SA11AI.11192**

Amount of Each Receipt this Period  
250.00  
GENERAL DEBT RETIREMENT

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SANTOSH GIVIDI**

Mailing Address 1606 BARTRUM TRAIL

City State Zip Code  
SUGAR LAND TX 77479

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

Name of Employer Occupation  
ORBIT CAPITAL LLC CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11166**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. GERALD GOBLE**

Mailing Address 1907 WINDING VIEW

City State Zip Code  
SAN ANTONIO TX 78260

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

Name of Employer Occupation  
IMS SECURITIES FINANCIAL ADVISOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2015

**Transaction ID : SA11AI.11568**

Amount of Each Receipt this Period  
250.00  
GENERAL DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**MR. GERALD GOBLE**

Mailing Address 1907 WINDING VIEW

City State Zip Code  
SAN ANTONIO TX 78260

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

Name of Employer Occupation  
IMS SECURITIES FINANCIAL ADVISOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2015

**Transaction ID : SA11AI.11569**

Amount of Each Receipt this Period  
250.00  
GENERAL DEBT RETIREMENT

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

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

3200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN GOOLSBY**

Mailing Address 24165 WEST IH 10  
SUITE 217-206

City SAN ANTONIO State TX Zip Code 78257

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 05 / 2015

**Transaction ID : SA11AI.11395**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**JAMES D GOUDGE**

Mailing Address 200 CLAIBORNE WAY

City SAN ANTONIO State TX Zip Code 78209

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

Name of Employer BROADWAY BANK Occupation BANKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 27 / 2015

**Transaction ID : SA11AI.11470**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**PHIL GRAMM**

Mailing Address PO BOX 1559

City HELOTES State TX Zip Code 78023

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

Name of Employer LONE STAR ACQUISITIONS Occupation ECONOMIST

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2015

**Transaction ID : SA11AI.11369**

Amount of Each Receipt this Period  
2700.00

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

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**PHIL GRAMM**

Mailing Address PO BOX 1559

City HELOTES State TX Zip Code 78023

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

Name of Employer LONE STAR ACQUISITIONS Occupation ECONOMIST

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2015

**Transaction ID : SA11AI.11370**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**WENDY LEE GRAMM**

Mailing Address PO BOX 1559

City HELOTES State TX Zip Code 78023

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2015

**Transaction ID : SA11AI.11371**

Amount of Each Receipt this Period  
2700.00

**C.** Full Name (Last, First, Middle Initial)  
**WENDY LEE GRAMM**

Mailing Address PO BOX 1559

City HELOTES State TX Zip Code 78023

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2015

**Transaction ID : SA11AI.11372**

Amount of Each Receipt this Period  
2700.00

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

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

8100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. KYLE GREENWOOD**

Mailing Address **PO BOX 5580**

City **BRYAN** State **TX** Zip Code **77805**

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

Name of Employer **BMI DEFENSE SYSTEMS** Occupation **ENGINEERING & MANUFACTURING**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : SA11AI.11652**

Amount of Each Receipt this Period  
**250.00**  
 GENERAL DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**HELEN K GROVES**

Mailing Address **700 N. ST MARYS  
STE 1200**

City **SAN ANTONIO** State **TX** Zip Code **78205**

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

Name of Employer **SELF EMPLOYED** Occupation **RANCHER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : SA11AI.11758**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**MS. CAROL M GRUEN**

Mailing Address **3 BEEBE LN**

City **HOUSTON** State **TX** Zip Code **77024**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 19 / 2015**

**Transaction ID : SA11AI.11253**

Amount of Each Receipt this Period  
**2700.00**

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

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

**3200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FRANK GRUEN**

Mailing Address **3 BEEBE LANE**

City **HOUSTON** State **TX** Zip Code **77024**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 19 / 2015**

**Transaction ID : SA11AI.11251**

Amount of Each Receipt this Period  
**2700.00**

**B.** Full Name (Last, First, Middle Initial)  
**MS. MARY JO GRUNDHOEFER**

Mailing Address **1500 STAG MDW**

City **SAN ANTONIO** State **TX** Zip Code **78248**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 18 / 2015**

**Transaction ID : SA11AI.11509**

Amount of Each Receipt this Period  
**2700.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. JACK GUENTHER**

Mailing Address **153 TREELINE PARK  
STE 300**

City **SAN ANTONIO** State **TX** Zip Code **78209**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 08 / 2015**

**Transaction ID : SA11AI.11565**

Amount of Each Receipt this Period  
**500.00**  
 GENERAL DEBT RETIREMENT

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

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

**5900.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

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

Mailing Address 1609 BILLY CASPER

City State Zip Code  
EL PASO TX 79936

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

Name of Employer Occupation  
ROCKY MOUNTAIN MORTGAGE CO CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1575.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : SA11AI.11296**

Amount of Each Receipt this Period  
1575.00  
GENERAL DEBT RETIREMENT

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

Mailing Address 1609 BILLY CASPER

City State Zip Code  
EL PASO TX 79936

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

Name of Employer Occupation  
ROCKY MOUNTAIN MORTGAGE CO CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : SA11AI.11297**

Amount of Each Receipt this Period  
1025.00  
PRIMARY DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**LEROY R HAYDEN Jr**

Mailing Address 739 W. OAK ESTATES DR

City State Zip Code  
SAN ANTONIO TX 78260

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 16 / 2015

**Transaction ID : SA11AI.11723**

Amount of Each Receipt this Period  
300.00

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

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

2900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. ROXANNE HAYNE**

Mailing Address 110 PASEO ENCINAL #1008

City SAN ANTONIO State TX Zip Code 78212

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

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 07 / 2015

**Transaction ID : SA11AI.11722**

Amount of Each Receipt this Period  
 250.00  
 GENERAL DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**MR. MARK HEALY**

Mailing Address 207 BLACKJACK OAK

City SHAVANO PARK State TX Zip Code 78230

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

Name of Employer STRG Occupation PHYSICIAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11693**

Amount of Each Receipt this Period  
 500.00  
 GENERAL DEBT RETIREMENT

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

Mailing Address 3310 OLD DOMINION BLVD

City ALEXANDRIA State VA Zip Code 22305

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

Name of Employer LUGAR HELLMANN GROUP Occupation CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11698**

Amount of Each Receipt this Period  
 500.00  
 GENERAL DEBT RETIREMENT

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

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

1250.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**VINCENT HENNESSY**

Mailing Address 21321 BABCOCK RD  
BLDG 1

City SAN ANTONIO State TX Zip Code 78255

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 14 / 2015

**Transaction ID : SA11AI.11130**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. JESSE HEREFORD**

Mailing Address 68 BURR RD

City SAN ANTONIO State TX Zip Code 78209

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

Name of Employer S&B INFRASTRUCTURE LTD Occupation ENGINEERING

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11688**

Amount of Each Receipt this Period  
500.00  
GENERAL DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOHN M HILL**

Mailing Address 10106 N MANTON LN

City SAN ANTONIO State TX Zip Code 78213

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

Name of Employer TECHSAGE SOLUTIONS Occupation PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : SA11AI.11264**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. GILBERT HINE**

Mailing Address 25702 APACHE CREEK

City State Zip Code  
SAN ANTONIO TX 78260

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

Name of Employer Occupation  
MCCLELLAND AND HINE INSURANCE BROKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2015

**Transaction ID : SA11AI.11116**

Amount of Each Receipt this Period  
 2600.00  
 GENERAL DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**MR. GILBERT HINE**

Mailing Address 25702 APACHE CREEK

City State Zip Code  
SAN ANTONIO TX 78260

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

Name of Employer Occupation  
MCCLELLAND AND HINE INSURANCE BROKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2015

**Transaction ID : SA11AI.11117**

Amount of Each Receipt this Period  
 2600.00  
 PRIMARY DEBT RETIREMENT

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

Mailing Address 1026 VAULTED OAK ST

City State Zip Code  
HOUSTON TX 77008

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

Name of Employer Occupation  
ENERGY EDGE CONSULTING CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 27 / 2015

**Transaction ID : SA11AI.11344**

Amount of Each Receipt this Period  
 1500.00

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

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

6700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DAVID HOLT**

Mailing Address 3418 GEORGETOWN

City HOUSTON State TX Zip Code 77005

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

Name of Employer: HBW RESOURCES, LLC Occupation: MANAGING PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 03 / 31 / 2015

**Transaction ID : SA11AI.11171**

Amount of Each Receipt this Period: 1000.00

GENERAL DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**MR. BILLY B HOPPER**

Mailing Address PO BOX 353

City MENTONE State TX Zip Code 79754

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

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 350.00

Date of Receipt: 02 / 05 / 2015

**Transaction ID : SA11AI.11400**

Amount of Each Receipt this Period: 250.00

**C.** Full Name (Last, First, Middle Initial)  
**PAMELA F HOWARD**

Mailing Address 144 PARK HILL DR

City SAN ANTONIO State TX Zip Code 78212

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

Name of Employer: SELF-EMPLOYED Occupation: RANCHER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 06 / 2015

**Transaction ID : SA11AI.11197**

Amount of Each Receipt this Period: 500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ARTHUR DENNIS HUEBNER**

Mailing Address 4242 BROADWAY ST # 1501

City SAN ANTONIO	State TX	Zip Code 78209
---------------------	-------------	-------------------

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

Name of Employer CCC GROUP INC	Occupation CONTRACTOR
-----------------------------------	--------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 27 / 2015

**Transaction ID : SA11AI.11467**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. ARTHUR DENNIS HUEBNER**

Mailing Address 4242 BROADWAY ST # 1501

City SAN ANTONIO	State TX	Zip Code 78209
---------------------	-------------	-------------------

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

Name of Employer CCC GROUP INC	Occupation CONTRACTOR
-----------------------------------	--------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2015

**Transaction ID : SA11AI.11377**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**DAN A HUGHES**

Mailing Address P.O. BOX 14

City BEEVILLE	State TX	Zip Code 78104
------------------	-------------	-------------------

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

Name of Employer DAN A. HUGES COMPANY	Occupation PRESIDENT
--	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11829**

Amount of Each Receipt this Period  
2700.00

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

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

4200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. PEGGY HUGHES**

Mailing Address **PO BOX 14**

City **BEEVILLE** State **TX** Zip Code **78104**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : SA11AI.11831**

Amount of Each Receipt this Period  
**2700.00**

**B.** Full Name (Last, First, Middle Initial)  
**MR. HARRY B JEWETT III**

Mailing Address **307 W RHAPSODY**

City **SAN ANTONIO** State **TX** Zip Code **78216**

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

Name of Employer **HARRY B. JEWETT III P.E., R.P.L.S.** Occupation **PRINCIPAL**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 27 / 2015**

**Transaction ID : SA11AI.11466**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**MS. MARJORIE JOBE**

Mailing Address **1150 SOUTHVIEW DR**

City **EL PASO** State **TX** Zip Code **79928**

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

Name of Employer **SELF-EMPLOYED** Occupation **ENTREPRENEUR**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : SA11AI.11308**

Amount of Each Receipt this Period  
**2700.00**

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

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

**5650.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. STANLEY P JOBE**

Mailing Address 1150 SOUTHVIEW DR

City State Zip Code  
EL PASO TX 79928

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

Name of Employer Occupation  
JOBE CONCRETE CEO/OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : SA11AI.11306**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. JASON JOHNSON**

Mailing Address 1031 MEMORIAL VILLAGE DR

City State Zip Code  
HOUSTON TX 77024

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

Name of Employer Occupation  
METRO NATIONAL CORPORATION REAL ESTATE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : SA11AI.11772**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**SREEDHAR KANCHANAKUNTLA**

Mailing Address 8585 WOODWAY DR  
APT 1114

City State Zip Code  
HOUSTON TX 77063

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

Name of Employer Occupation  
SELF-EMPLOYED SELF EMPLOYED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : SA11AI.11788**

Amount of Each Receipt this Period  
1000.00

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

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

4200.00

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

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

FOR LINE NUMBER: PAGE 39 OF 164  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. RUSSELL T KELLEY**

Mailing Address **919 CONGRESS AVE  
STE 950**

City **AUSTIN** State **TX** Zip Code **78701**

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

Name of Employer **BLACKRIDGE** Occupation **OWNER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 03 / 2015**

**Transaction ID : SA11AI.11485**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**MR. PATRICK J KENNEDY**

Mailing Address **1027 AUSTIN HIGHWAY  
STE 108**

City **SAN ANTONIO** State **TX** Zip Code **78209**

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

Name of Employer **SELF-EMPLOYED** Occupation **HOTEL DEVELOPMENT & MANAGEMENT**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 16 / 2015**

**Transaction ID : SA11AI.11481**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. SCOTT KERCHEVILLE**

Mailing Address **14 ETON GREEN CIR**

City **SAN ANTONIO** State **TX** Zip Code **78257**

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

Name of Employer **UTHSCSA** Occupation **PHYSICIAN**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**275.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 25 / 2015**

**Transaction ID : SA11AI.11118**

Amount of Each Receipt this Period  
**25.00**  
 GENERAL DEBT RETIREMENT

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

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

**3525.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. SCOTT KERCHEVILLE**

Mailing Address 14 ETON GREEN CIR

City SAN ANTONIO State TX Zip Code 78257

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

Name of Employer UTHSCSA Occupation PHYSICIAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2015

**Transaction ID : SA11AI.11119**

Amount of Each Receipt this Period  
 225.00  
 GENERAL DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**AARON KOZMETSKY**

Mailing Address 4117 WINDSOR PARKWAY

City DALLAS State TX Zip Code 75205

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

Name of Employer KMS VENTURES Occupation INVESTMENTS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11657**

Amount of Each Receipt this Period  
 500.00  
 GENERAL DEBT RETIREMENT

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

Mailing Address 15060 CADILLAC DR

City SAN ANTONIO State TX Zip Code 78248

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

Name of Employer KRIER CONSULTING GROUP INC Occupation CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11136**

Amount of Each Receipt this Period  
 500.00  
 GENERAL DEBT RETIREMENT

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

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

1225.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. BLAIR C LARKINS**

Mailing Address 3101 N HAMPTON DR  
APT 1101

City State Zip Code  
ALEXANDRIA VA 22302

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

Name of Employer Occupation  
BOCKOMY GROUP INC DIRECTOR OF GOVERNMENT AFFAIRS

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11AI.11353**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. FRANK H LARSON**

Mailing Address PO BOX 421147

City State Zip Code  
DEL RIO TX 78842

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

Name of Employer Occupation  
SELF-EMPLOYED TRUCKING WAREHOUSING

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 29 / 2015

**Transaction ID : SA11AI.11293**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**AIMEE LOCKE**

Mailing Address 601 CONTOUR DRIVE

City State Zip Code  
SAN ANTONIO TX 78212

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 27 / 2015

**Transaction ID : SA11AI.11502**

Amount of Each Receipt this Period  
2700.00

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

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

3450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JEFFREY M MACKINNON**

Mailing Address 3753 OLIVER STREET NW

City WASHINGTON State DC Zip Code 20015

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

Name of Employer RYAN, MACKINNON, VASAPOLI AND BERZOI Occupation PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2015

**Transaction ID : SA11AI.11603**

Amount of Each Receipt this Period  
 1000.00  
 GENERAL DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**MS. DIANE MAGEE**

Mailing Address 5100 SAN FELIPE #758

City HOUSTON State TX Zip Code 77056

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11553**

Amount of Each Receipt this Period  
 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**MS. DIANE MAGEE**

Mailing Address 5100 SAN FELIPE #758

City HOUSTON State TX Zip Code 77056

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11658**

Amount of Each Receipt this Period  
 2700.00

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

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

6400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. NEILL MAGEE**

Mailing Address 5100 SAN FELIPE #758

City HOUSTON State TX Zip Code 77056

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

Name of Employer MCAPITAL Occupation OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11555**

Amount of Each Receipt this Period  
 2700.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. NEILL MAGEE**

Mailing Address 5100 SAN FELIPE #758

City HOUSTON State TX Zip Code 77056

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

Name of Employer MCAPITAL Occupation OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11561**

Amount of Each Receipt this Period  
 2700.00

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

Mailing Address PO BOX 403

City SONORA State TX Zip Code 76950

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

Name of Employer FIRST NATIONAL BANK Occupation EXECUTIVE CHAIRMAN

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11238**

Amount of Each Receipt this Period  
 1000.00

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

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

6400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**PAIGE MANARD**

Mailing Address 5318 WINDING RIVER RD

City State Zip Code  
RICHMOND TX 77469

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

Name of Employer Occupation  
LASER SHOT INC PARTNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11774**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**MS. JANETTE M MARBUT**

Mailing Address PO BOX 90417

City State Zip Code  
SAN ANTONIO TX 78209

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11593**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**DONALD R. MARGO II**

Mailing Address 201 E MAIN  
STE 1603

City State Zip Code  
EL PASO TX 79901

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

Name of Employer Occupation  
MARGO PARTNERS INC. INVESTMENTS

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11767**

Amount of Each Receipt this Period  
2700.00

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

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

3950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MILES MARKS**

Mailing Address 6020 INWOOD DR

City HOUSTON State TX Zip Code 77057

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

Name of Employer AVALON ADVISORS Occupation FINANCIAL ADVISOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11818**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. JACK MAYFIELD**

Mailing Address 5611 URSULA LN

City DALLAS State TX Zip Code 75229

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

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 20 / 2015

**Transaction ID : SA11AI.11745**

Amount of Each Receipt this Period  
1000.00  
GENERAL DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**L. LOWRY MAYS**

Mailing Address P.O. BOX 659512

City SAN ANTONIO State TX Zip Code 78265

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

Name of Employer CLEAR CHANNEL COMMUNICATIONS Occupation PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 19 / 2015

**Transaction ID : SA11AI.11405**

Amount of Each Receipt this Period  
2700.00

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

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

3950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. L. LOWRY MAYS</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 19 / 2015	
Mailing Address P.O. BOX 659512		<b>Transaction ID : SA11AI.11406</b>	
City SAN ANTONIO	State TX	Zip Code 78265	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00	
Name of Employer CLEAR CHANNEL COMMUNICATIONS	Occupation PRESIDENT		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		

Full Name (Last, First, Middle Initial) <b>B. PEGGY MAYS</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 19 / 2015	
Mailing Address P.O BOX 659512		<b>Transaction ID : SA11AI.11407</b>	
City SAN ANTONIO	State TX	Zip Code 78265	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00	
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		

Full Name (Last, First, Middle Initial) <b>C. PEGGY MAYS</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 19 / 2015	
Mailing Address P.O BOX 659512		<b>Transaction ID : SA11AI.11520</b>	
City SAN ANTONIO	State TX	Zip Code 78265	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00	
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7300.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JANELLE MCARTHUR**

Mailing Address 5680 PRUE RD

City State Zip Code  
SAN ANTONIO TX 78210

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

Name of Employer Occupation  
SELF EMPLOYED FUNDRAISING

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 29 / 2015

**Transaction ID : SA11AI.11286**

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
**JANELLE MCARTHUR**

Mailing Address 5680 PRUE RD

City State Zip Code  
SAN ANTONIO TX 78210

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

Name of Employer Occupation  
SELF EMPLOYED FUNDRAISING

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : SA11AI.11198**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**B J MCCOMBS**

Mailing Address P.O. BOX BH003

City State Zip Code  
SAN ANTONIO TX 78201

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

Name of Employer Occupation  
MCCOMBS ENTERPRISES CHAIRMAN & CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : SA11AI.11505**

Amount of Each Receipt this Period  
2300.00

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

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

2800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**B J MCCOMBS**

Mailing Address P.O. BOX BH003

City State Zip Code  
SAN ANTONIO TX 78201

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

Name of Employer Occupation  
MCCOMBS ENTERPRISES CHAIRMAN & CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : SA11AI.11736**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**MS. CHARLINE H MCCOMBS**

Mailing Address 825 CONTOUR DR

City State Zip Code  
SAN ANTONIO TX 78212

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : SA11AI.11272**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. BRIAN VAUGHAN MCCORMACK**

Mailing Address 3900 CATHEDRAL AVE NW  
APT 610A

City State Zip Code  
WASHINGTON DC 20016

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

Name of Employer Occupation  
EDISON ELECTRICAL INSTITUTE POLITICAL AND EXTERNAL AFFAIRS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2015

**Transaction ID : SA11AI.11602**

Amount of Each Receipt this Period  
250.00  
GENERAL DEBT RETIREMENT

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

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

3950.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

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

Mailing Address 6406 OLYMPIA DR.

City HOUSTON State TX Zip Code 77057

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

Name of Employer SELF-EMPLOYED Occupation SALES

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11167**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. JON MEANS**

Mailing Address PO BOX 489

City VAN HORN State TX Zip Code 79855

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

Name of Employer MEANS CO RANCHER Occupation RANCHER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 29 / 2015

**Transaction ID : SA11AI.11291**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. DON MEYER**

Mailing Address 8 REMINGTON CIR

City SAN ANTONIO State TX Zip Code 78258

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

Name of Employer HALLMARK SPECIAL UNDERWRITER Occupation INSURANCE EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 27 / 2015

**Transaction ID : SA11AI.11439**

Amount of Each Receipt this Period  
 1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**M REZA MIZANI**

Mailing Address 625 CASTANO AVE

City State Zip Code  
SAN ANTONIO TX 78209

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

Name of Employer Occupation  
SOUTH TEXAS RENAL CARE GROUP PHYSICIAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 27 / 2015

**Transaction ID : SA11AI.11640**

Amount of Each Receipt this Period  
1600.00  
GENERAL DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**M REZA MIZANI**

Mailing Address 625 CASTANO AVE

City State Zip Code  
SAN ANTONIO TX 78209

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

Name of Employer Occupation  
SOUTH TEXAS RENAL CARE GROUP PHYSICIAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 27 / 2015

**Transaction ID : SA11AI.11641**

Amount of Each Receipt this Period  
2600.00  
PRIMARY DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**M REZA MIZANI**

Mailing Address 625 CASTANO AVE

City State Zip Code  
SAN ANTONIO TX 78209

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

Name of Employer Occupation  
SOUTH TEXAS RENAL CARE GROUP PHYSICIAN

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 27 / 2015

**Transaction ID : SA11AI.11642**

Amount of Each Receipt this Period  
1000.00

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

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

5200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. TIFFANY MOORE**

Mailing Address 417 QUACKENBOS ST NW

City State Zip Code  
WASHINGTON DC 20011

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

Name of Employer Occupation  
SELF-EMPLOYED CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11299**

Amount of Each Receipt this Period  
 1000.00  
 GENERAL DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**EDGAR MORALES**

Mailing Address 4511 HAWTHORN WOODS

City State Zip Code  
SAN ANTONIO TX 78249

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 23 / 2015

**Transaction ID : SA11AI.11425**

Amount of Each Receipt this Period  
 500.00  
 GENERAL DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**DIRK P MOSIS III**

Mailing Address 118 KITTY KAT LANE

City State Zip Code  
BOERNE TX 78006

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

Name of Employer Occupation  
USAA COMMERCIAL REAL ESTATE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11573**

Amount of Each Receipt this Period  
 2700.00

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

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

4200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>DIRK P MOSIS III</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2015
Mailing Address 118 KITTY KAT LANE		<b>Transaction ID : SA11AI.11574</b>
City BOERNE	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer USAA	Occupation COMMERCIAL REAL ESTATE	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) <b>DAVID G MULHOLLAND</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 18 / 2015
Mailing Address 177 FALLING HILLS		<b>Transaction ID : SA11AI.11735</b>
City NEW BRAUNFELS	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>MR. EDWARD MULLEN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 09 / 2015
Mailing Address 705 CHETWORTH PL		<b>Transaction ID : SA11AI.11516</b>
City ALEXANDRIA	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer UNIVERSITY OF VIRGINIA SCHOOL OF LAW	Occupation LECTURER	PRIMARY DEBT RETIREMENT
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SATISH NANNAPANENI**

Mailing Address 6730 HAWSLEY WAY

City State Zip Code  
SUGAR LAND TX 77479

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
FLEXERA GLOBAL, INC. OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11786**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MS. BARBARA NAU**

Mailing Address 3690 INWOOD DR

City State Zip Code  
HOUSTON TX 77019

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SILVER EALGE DISTRIBUTORS, LP CORPORATE SECRETARY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11783**

Amount of Each Receipt this Period

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

Mailing Address 3690 INWOOD DR

City State Zip Code  
HOUSTON TX 77019

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SILVER EALGE DISTRIBUTORS, LP CORPORATE SECRETARY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11784**

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN L NAU III**

Mailing Address 3690 INWOOD DR

City HOUSTON State TX Zip Code 77019

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

Name of Employer SILVER EAGLE DISTRIBUTORS, LP Occupation PRESIDENT & CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11780**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOHN L NAU III**

Mailing Address 3690 INWOOD DR

City HOUSTON State TX Zip Code 77019

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

Name of Employer SILVER EAGLE DISTRIBUTORS, LP Occupation PRESIDENT & CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11781**

Amount of Each Receipt this Period  
2700.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. L CHARLES NEELY JR.**

Mailing Address 109 REGENTS PARK

City SAN ANTONIO State TX Zip Code 78230

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

Name of Employer SAN ANTONIO STEEL COMPANY Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2015

**Transaction ID : SA11AI.11374**

Amount of Each Receipt this Period  
2700.00

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

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

8100.00

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

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

FOR LINE NUMBER: PAGE 55 OF 164  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. L CHARLES NEELY JR.**

Mailing Address 109 REGENTS PARK

City State Zip Code  
SAN ANTONIO TX 78230

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

Name of Employer Occupation  
SAN ANTONIO STEEL COMPANY CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2015

**Transaction ID : SA11AI.11375**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**SUSAN NEELY**

Mailing Address 526 E OLMOS DR

City State Zip Code  
SAN ANTONIO TX 78212

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

Name of Employer Occupation  
FARMERS INSURANCE INSURANCE CLAIMS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 08 / 2015

**Transaction ID : SA11AI.11566**

Amount of Each Receipt this Period  
250.00  
GENERAL DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**MR. KYLE NEVINS**

Mailing Address 1325 D STREET NE

City State Zip Code  
WASHINGTON DC 20002

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

Name of Employer Occupation  
CAPITOL COUNSEL LLC CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2015

**Transaction ID : SA11AI.11581**

Amount of Each Receipt this Period  
500.00  
GENERAL DEBT RETIREMENT

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

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

3450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DENNIS NIXON**

Mailing Address 510 MCPHERSON DR

City State Zip Code  
LAREDO TX 78041

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

Name of Employer Occupation  
INTERNATION BANK OF COMMERCE BANKER - CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11696**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**MS. JILL L PETRY**

Mailing Address PO BOX 218

City State Zip Code  
CARRIZO SPRINGS TX 78834

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

Name of Employer Occupation  
RIO GRANDE TITLE, INC. VP

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 27 / 2015

**Transaction ID : SA11AI.11461**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**MS. DIANE RATH**

Mailing Address 419 WILTSHIRE AVE

City State Zip Code  
SAN ANTONIO TX 78209

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

Name of Employer Occupation  
RESCARE WORKFORCE SERVICES EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : SA11AI.11216**

Amount of Each Receipt this Period  
500.00  
GENERAL DEBT RETIREMENT

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

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

3450.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ARTHUR RIKLIN**

Mailing Address 122 LABURNUM

City State Zip Code  
SAN ANTONIO TX 78209

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2015

**Transaction ID : SA11AI.11599**

Amount of Each Receipt this Period  
 1000.00  
 GENERAL DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**MR. ARTHUR RIKLIN**

Mailing Address 122 LABURNUM

City State Zip Code  
SAN ANTONIO TX 78209

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : SA11AI.11717**

Amount of Each Receipt this Period  
 1000.00  
 GENERAL DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**MR. CARLOS ROCA**

Mailing Address 11603 CROSSWINDS WAY  
STE 100

City State Zip Code  
SAN ANTONIO TX 78233

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

Name of Employer Occupation  
CDD CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 20 / 2015

**Transaction ID : SA11AI.11418**

Amount of Each Receipt this Period  
 2500.00  
 GENERAL DEBT RETIREMENT

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. KENNETH ROTHE**

Mailing Address 3411 MAGIC DR

City State Zip Code  
SAN ANTONIO TX 78229

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

Name of Employer Occupation  
CDS ENGINEER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 25 / 2015

**Transaction ID : SA11AI.11582**

Amount of Each Receipt this Period  
250.00  
GENERAL DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**MR. KARL ROVE**

Mailing Address 1408 CIRCLE RIDGE DR

City State Zip Code  
AUSTIN TX 78746

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

Name of Employer Occupation  
KAR ROVE & CO WRITER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : SA11AI.11708**

Amount of Each Receipt this Period  
500.00

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

Mailing Address PO BOX 34630

City State Zip Code  
SAN ANTONIO TX 78265

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

Name of Employer Occupation  
RUSH ENTERPRISES SECRETARY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 16 / 2015

**Transaction ID : SA11AI.11480**

Amount of Each Receipt this Period  
2700.00

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

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

3450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. W MARVIN RUSH**

Mailing Address **PO BOX 34630**

City **SAN ANTONIO** State **TX** Zip Code **78265**

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

Name of Employer **RUSH ENTERPRISES** Occupation **DIRECTOR**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 16 / 2015**

**Transaction ID : SA11AI.11250**

Amount of Each Receipt this Period  
**2700.00**

**B.** Full Name (Last, First, Middle Initial)  
**MR. W MARVIN RUSH**

Mailing Address **PO BOX 34630**

City **SAN ANTONIO** State **TX** Zip Code **78265**

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

Name of Employer **RUSH ENTERPRISES** Occupation **DIRECTOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : SA11AI.11152**

Amount of Each Receipt this Period  
**2600.00**

**GENERAL DEBT RETIREMENT**

**C.** Full Name (Last, First, Middle Initial)  
**JOHN E RUSSELL**

Mailing Address **6126 SUGAR HILL DR**

City **HOUSTON** State **TX** Zip Code **77057**

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

Name of Employer **KIRKY INLAND MARINE** Occupation **SENIOR VP SALES**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : SA11AI.11775**

Amount of Each Receipt this Period  
**250.00**

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

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

**5550.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. PAT R RUTHERFORD**

Mailing Address **8 GREENWAY PLAZA**  
**STE 1400**

City **HOUSTON** State **TX** Zip Code **77046**

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

Name of Employer **RUTHERFORD OIL CORP** Occupation **OWNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 12 / 2015**

**Transaction ID : SA11AI.11364**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **112 HUDSON CT**

City **NAPERVILLE** State **IL** Zip Code **60565**

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

Name of Employer **CONSTELLATION BRANDS BEER DIVISION** Occupation **SVP CORPORATE AFFAIRS**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : SA11AI.11691**

Amount of Each Receipt this Period  
**1000.00**  
**GENERAL DEBT RETIREMENT**

**C.** Full Name (Last, First, Middle Initial)  
**DAYTON L SCHRADER**

Mailing Address **300 E. SONTERRA BLVD**  
**BLDG 1 #1180**

City **SAN ANTONIO** State **TX** Zip Code **78258**

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

Name of Employer **THE SCHRADER GROUP** Occupation **OWNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 12 / 2015**

**Transaction ID : SA11AI.11330**

Amount of Each Receipt this Period  
**250.00**

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

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

**1750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. SHERRILL SITTRE**

Mailing Address PO BOX 119

City RIO MEDINA State TX Zip Code 78066

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

Name of Employer ARROW MATERIALS Occupation ASSISTANT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11A1.11776**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. J MARVIN SMITH**

Mailing Address 6800 IH 10 WEST

City SAN ANTONIO State TX Zip Code 78201

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

Name of Employer CARDIOTHORACIC SURGICAL ASSOCIATES Occupation PHYSICIAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11A1.11144**

Amount of Each Receipt this Period  
500.00

GENERAL DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**MR. DON L SPARKS**

Mailing Address 800 N MARIENFELD ST  
STE 100

City MIDLAND State TX Zip Code 79701

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

Name of Employer DISCOVERY DEPARTING Occupation PETROLEUM

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 03 / 2015

**Transaction ID : SA11A1.11489**

Amount of Each Receipt this Period  
2000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

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

Mailing Address 110 BENT OAK DR

City State Zip Code  
SAN ANTONIO TX 78231

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 14 / 2015

**Transaction ID : SA11AI.11563**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 110 BENT OAK DR

City State Zip Code  
SAN ANTONIO TX 78231

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 30 / 2015

**Transaction ID : SA11AI.11583**

Amount of Each Receipt this Period  
500.00

GENERAL DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**DAVID SPENCER**

Mailing Address 26610 HARMONY HILLS

City State Zip Code  
SAN ANTONIO TX 78260

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

Name of Employer Occupation  
TEXAS INTREPID VENTURES ENTREPRENEUR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 19 / 2015

**Transaction ID : SA11AI.11526**

Amount of Each Receipt this Period  
2700.00

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

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. JENNIFER SPENCER**

Mailing Address 26610 HARMONY HILLS

City State Zip Code  
SAN ANTONIO TX 78258

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 19 / 2015

**Transaction ID : SA11AI.11528**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. WESLEY A SPURLOCK**

Mailing Address PO BOX 840

City State Zip Code  
STRATFORD TX 79084

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

Name of Employer Occupation  
SELF-EMPLOYED CORN FARMER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 25 / 2015

**Transaction ID : SA11AI.11801**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**MS. KATHARINE STARLEY**

Mailing Address 3801 N CAPITAL OF TEXAS HWY  
STE 425

City State Zip Code  
AUSTIN TX 78746

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

Name of Employer Occupation  
BUFFINGTON CAPITAL HOLDINGS CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 03 / 2015

**Transaction ID : SA11AI.11390**

Amount of Each Receipt this Period  
2600.00

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

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

5350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. PATRICK STARLEY**

Mailing Address 3801 N CAPITAL OF TEXAS HWY  
STE 425

City State Zip Code  
AUSTIN TX 78746

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

Name of Employer Occupation  
CIELO PRIVATE EQUITY CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 03 / 2015

**Transaction ID : SA11AI.11388**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**JOHN T STILES**

Mailing Address 7887 BROADWAY ST  
#906

City State Zip Code  
SAN ANTONIO TX 78209

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2015

**Transaction ID : SA11AI.11324**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**MS. PATRICIA STOLNACKER**

Mailing Address 4645 GREENE PL NW

City State Zip Code  
WASHINGTON DC 02007

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

Name of Employer Occupation  
VMWARE DIRECTOR, GOVERNMENT RELATIONS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 16 / 2015

**Transaction ID : SA11AI.11281**

Amount of Each Receipt this Period  
500.00  
GENERAL DEBT RETIREMENT

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

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

4100.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. GEORGE W STRAKE JR.**

Mailing Address 712 MAIN ST  
STE 3300

City HOUSTON State TX Zip Code 77002

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

Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 16 / 2015

**Transaction ID : SA11AI.11732**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**COURTNEY L TOON**

Mailing Address 5556 CRANBROOK RD

City HOUSTON State TX Zip Code 77056

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11548**

Amount of Each Receipt this Period  
2700.00

**C.** Full Name (Last, First, Middle Initial)  
**COURTNEY L TOON**

Mailing Address 5556 CRANBROOK RD

City HOUSTON State TX Zip Code 77056

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11659**

Amount of Each Receipt this Period  
2700.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MARK P TOON**

Mailing Address 5556 CRANBROOK RD

City HOUSTON State TX Zip Code 77056

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

Name of Employer KPMG Occupation EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11547**

Amount of Each Receipt this Period  
 2700.00

**B.** Full Name (Last, First, Middle Initial)  
**MARK P TOON**

Mailing Address 5556 CRANBROOK RD

City HOUSTON State TX Zip Code 77056

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

Name of Employer KPMG Occupation EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11560**

Amount of Each Receipt this Period  
 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. KENNETH TRAIN**

Mailing Address 4242 BROADWAY #506

City SAN ANTONIO State TX Zip Code 78209

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

Name of Employer SWIFF TRAIN COMPANY Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11140**

Amount of Each Receipt this Period  
 500.00  
 GENERAL DEBT RETIREMENT

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

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

5900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BILLY R TRIMMIER**

Mailing Address 14663 CADILAC DR

City State Zip Code  
SAN ANTONIO TX 78248

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : SA11AI.11267**

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. J H UPTMORE**

Mailing Address 8400 BLANCO RD  
STE 204

City State Zip Code  
SAN ANTONIO TX 78216

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

Name of Employer Occupation  
SELF-EMPLOYED FARMER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 27 / 2015

**Transaction ID : SA11AI.11474**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. SAM VALE**

Mailing Address PO BOX 156  
804 B W MAIN ST

City State Zip Code  
RIO GRANDE CITY TX 78582

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

Name of Employer Occupation  
STARR-CAMARGO BRIDGE CO PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11557**

Amount of Each Receipt this Period  
1000.00  
GENERAL DEBT RETIREMENT

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

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

1700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. KATHALEEN WALL**

Mailing Address PO BOX 667

City HOUSTON State TX Zip Code 77001

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2015

**Transaction ID : SA11AI.11523**

Amount of Each Receipt this Period  
 2700.00

**B.** Full Name (Last, First, Middle Initial)  
**MS. KATHALEEN WALL**

Mailing Address PO BOX 667

City HOUSTON State TX Zip Code 77001

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2015

**Transaction ID : SA11AI.11524**

Amount of Each Receipt this Period  
 2300.00

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

Mailing Address P.O. BOX 340219

City AUSTIN State TX Zip Code 78734

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

Name of Employer SELF-EMPLOYED Occupation FINANCE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

**Transaction ID : SA11AI.11231**

Amount of Each Receipt this Period  
 2600.00  
 GENERAL DEBT RETIREMENT

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

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

7600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. MARK E WATSON JR.**

Mailing Address **PO BOX 6886**

City **SAN ANTONIO** State **TX** Zip Code **78209**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 03 / 2015**

**Transaction ID : SA11AI.11630**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**MS. MEG WEEKLEY**

Mailing Address **1111 N POST OAK RD**

City **HOUSTON** State **TX** Zip Code **77055**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : SA11AI.11791**

Amount of Each Receipt this Period  
**2700.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD W. WEEKLEY**

Mailing Address **1111 N POST OAK ROAD**

City **HOUSTON** State **TX** Zip Code **77055-7211**

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

Name of Employer **SELF-EMPLOYED** Occupation **DEVELOPER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : SA11AI.11789**

Amount of Each Receipt this Period  
**2700.00**

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

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

**7900.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. GRAHAM M WESTON**

Mailing Address 112 E PECAN ST  
STE 6

City SAN ANTONIO State TX Zip Code 78205

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

Name of Employer RACKSPACE Occupation CHAIRMAN

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 03 / 2015

**Transaction ID : SA11AI.11303**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**DON WHITAKER**

Mailing Address 627 BIRDSONG S

City SAN ANTONIO State TX Zip Code 78258

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

Name of Employer WHITAKER INSURANCE ASSOCIATION Occupation SELF-EMPLOYED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 14 / 2015

**Transaction ID : SA11AI.11676**

Amount of Each Receipt this Period  
 250.00  
 GENERAL DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**STACY WILKIRSON**

Mailing Address 557 W DANA LANE

City HOUSTON State TX Zip Code 77024

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.11815**

Amount of Each Receipt this Period  
 300.00

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

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

3050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. WELCOME W WILSON SR**

Mailing Address 5858 WESTHEIMER  
STE 800

City HOUSTON State TX Zip Code 77057

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

Name of Employer WECLOME GROUP Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2015

**Transaction ID : SA11AI.11580**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**JOHN M YANTIS**

Mailing Address 5331 FREDERISKBURG RD

City SAN ANTONIO State TX Zip Code 78229

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : SA11AI.11204**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**MS. DIANA YOUNG**

Mailing Address 200 BUCKEYE TRL

City AUSTIN State TX Zip Code 78746

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 16 / 2015

**Transaction ID : SA11AI.11731**

Amount of Each Receipt this Period  
 2700.00

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

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

4200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

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

Mailing Address 200 BUCKEYE TRL

City State Zip Code  
AUSTIN TX 78746

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 16 / 2015

**Transaction ID : SA11AI.11729**

Amount of Each Receipt this Period  
2700.00

**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)

Election Cycle-to-Date

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

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)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

2700.00

305450.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
ACTION COMMITTEE FOR RURAL ELECTRIFICATION/MISSOURI COOPERATIVES (FKA MISSOURI ACRE)

Mailing Address PO BOX 1645

City State Zip Code  
JEFFERSON CITY MO 65102

FEC ID number of contributing federal political committee. **C** C00008169

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.11161**

Amount of Each Receipt this Period  
 2500.00  
 GENERAL DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
ACTION COMMITTEE FOR RURAL ELECTRIFICATION/MISSOURI COOPERATIVES (FKA MISSOURI ACRE)

Mailing Address PO BOX 1645

City State Zip Code  
JEFFERSON CITY MO 65102

FEC ID number of contributing federal political committee. **C** C00008169

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11C.11310**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**AIR LINE PILOTS ASSOCIATION PAC**

Mailing Address 1625 MASSACHUSETTS AVE. NW

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11C.11833**

Amount of Each Receipt this Period  
 1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)**

Mailing Address 1120 CONNECTICUT AVENUE NW  
SUITE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11C.11411**

Amount of Each Receipt this Period  
 1000.00

Amount of Each Receipt this Period  
 3000.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1111 14TH STREET, NW  
SUITE 1100

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : SA11C.11512**

Amount of Each Receipt this Period  
 1000.00

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN FUELS AND PETROCHEMICAL MANUFACTURERS ASSOCIATION POLITICAL ACTION COMMITTEE (AFP)**

Mailing Address 1667 K STREET NW  
SUITE 700

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00415026

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 25 / 2015

**Transaction ID : SA11C.11810**

Amount of Each Receipt this Period  
 2500.00

Amount of Each Receipt this Period  
 3500.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 75 OF 164  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICANS FOR REPUBLICAN LEADERSHIP PAC**

Mailing Address **PO BOX 225**

City **COLONIA** State **NJ** Zip Code **07067**

FEC ID number of contributing federal political committee. **C C00383422**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : SA11C.11766**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**ASSOCIATED BUILDERS AND CONTRACTORS POLITICAL ACTION COMMITTEE**

Mailing Address **440 FIRST STREET, N.W.  
2ND FLOOR**

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00010421**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 27 / 2015**

**Transaction ID : SA11C.11182**

Amount of Each Receipt this Period  
**5000.00**

**C.** Full Name (Last, First, Middle Initial)  
**BEEF-PAC (BEEF POLITICAL ACTION COMMITTEE OF TEXAS CATTLE FEEDERS ASSOCIATION)**

Mailing Address **5501 W I-40**

City **AMARILLO** State **TX** Zip Code **79106**

FEC ID number of contributing federal political committee. **C C00015552**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : SA11C.11753**

Amount of Each Receipt this Period  
**2500.00**

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

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

**8000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BILIRAKIS FOR CONGRESS**

Mailing Address PO BOX 606

City State Zip Code  
TARPON SPRINGS FL 34688

FEC ID number of contributing federal political committee. **C** C00408534

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11C.11247**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 2000 K STREET, NW  
SUITE 500

City State Zip Code  
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00021295

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2015

**Transaction ID : SA11C.11601**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (BUILDPAC)

Mailing Address 1201 15TH STREET, NW

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11C.11828**

Amount of Each Receipt this Period  
5000.00

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
CHEVRON EMPLOYEES POLITICAL ACTION COMMITTEE - CHEVRON CORPORATION

Mailing Address 6101 BOLLINGER CANYON ROAD  
ROOM 3418

City SAN RAMON State CA Zip Code 94583

FEC ID number of contributing federal political committee. **C** C00035006

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 27 / 2015

**Transaction ID : SA11C.11114**

Amount of Each Receipt this Period  
2500.00  
GENERAL DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
CHEVRON EMPLOYEES POLITICAL ACTION COMMITTEE - CHEVRON CORPORATION

Mailing Address 6101 BOLLINGER CANYON ROAD  
ROOM 3418

City SAN RAMON State CA Zip Code 94583

FEC ID number of contributing federal political committee. **C** C00035006

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : SA11C.11415**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
CHEVRON EMPLOYEES POLITICAL ACTION COMMITTEE - CHEVRON CORPORATION

Mailing Address 6101 BOLLINGER CANYON ROAD  
ROOM 3418

City SAN RAMON State CA Zip Code 94583

FEC ID number of contributing federal political committee. **C** C00035006

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : SA11C.11747**

Amount of Each Receipt this Period  
5000.00

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

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

12500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CMR POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 2485

City Springfield State VA Zip Code 22152

FEC ID number of contributing federal political committee. **C** C00469429

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2015

**Transaction ID : SA11C.11808**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL**

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2015

**Transaction ID : SA11C.11121**

Amount of Each Receipt this Period  
 1000.00

GENERAL DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**DEFENDING AND INVESTING IN AMERICA'S NEW ENDEAVORS PAC (DIANE PAC)**

Mailing Address PO BOX 1437

City Gallatin State TN Zip Code 37066

FEC ID number of contributing federal political committee. **C** C00499996

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.11105**

Amount of Each Receipt this Period  
 1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**EDISON INTERNATIONAL PAC**

Mailing Address 515 S. FIGUEROA ST., STE. 1110

City LOS ANGELES State CA Zip Code 90071

FEC ID number of contributing federal political committee. **C** C00019653

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11C.11589**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**EXXON MOBIL CORPORATION POLITICAL ACTION COMMITTEE (EXXONMOBIL PAC)**

Mailing Address PO BOX 20503

City INDIANAPOLIS State IN Zip Code 46220

FEC ID number of contributing federal political committee. **C** C00121368

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2015

**Transaction ID : SA11C.11402**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**EYE OF THE TIGER PAC**

Mailing Address PO BOX 2485

City SPRINGFIELD State VA Zip Code 22152

FEC ID number of contributing federal political committee. **C** C00467431

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.11098**

Amount of Each Receipt this Period  
 5000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FEDEXPAC FEDERAL EXPRESS POLITICAL ACTION COMMITTEE**

Mailing Address 942 SOUTH SHADY GROVE ROAD

City MEMPHIS State TN Zip Code 38120

FEC ID number of contributing federal political committee. **C** C00068692

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.11159**

Amount of Each Receipt this Period  
 1000.00  
 GENERAL DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**FREEDOM AND SECURITY PAC**

Mailing Address 228 S. WASHINGTON ST., STE. 115

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00437061

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11C.11309**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**FREEDOM MATTERS PAC**

Mailing Address 8410 HWY 90 A STE 160

City SUGAR LAND State TX Zip Code 77478

FEC ID number of contributing federal political committee. **C** C00491910

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11C.11770**

Amount of Each Receipt this Period  
 2000.00

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

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

4000.00



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

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

FOR LINE NUMBER: PAGE 81 OF 164  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FREEDOM PROJECT; THE**

Mailing Address 320 1ST STREET SE

City State Zip Code  
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C** C00305805

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2015

**Transaction ID : SA11C.11799**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**FREEDOM PROJECT; THE**

Mailing Address 320 1ST STREET SE

City State Zip Code  
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C** C00305805

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2015

**Transaction ID : SA11C.11814**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**FRIENDS OF JOHN BOEHNER**

Mailing Address 7908 CINCINNATI DAYTON ROAD  
SUITE I

City State Zip Code  
WEST CHESTER OH 45069

FEC ID number of contributing federal political committee. **C** C00237198

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2015

**Transaction ID : SA11C.11797**

Amount of Each Receipt this Period  
2000.00

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

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

12000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FRIENDS OF JOHN BOEHNER**

Mailing Address 7908 CINCINNATI DAYTON ROAD  
SUITE I

City WEST CHESTER State OH Zip Code 45069

FEC ID number of contributing federal political committee. **C** C00237198

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2015

**Transaction ID : SA11C.11813**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**FRIENDS OF SAM JOHNSON**

Mailing Address P.O. BOX 860096

City PLANO State TX Zip Code 75086

FEC ID number of contributing federal political committee. **C** C00250720

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 09 / 2015

**Transaction ID : SA11C.11517**

Amount of Each Receipt this Period  
1000.00

GENERAL DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**FRIENDS OF SAM JOHNSON**

Mailing Address P.O. BOX 860096

City PLANO State TX Zip Code 75086

FEC ID number of contributing federal political committee. **C** C00250720

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.11094**

Amount of Each Receipt this Period  
1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FRIENDS OF SUSAN BROOKS**

Mailing Address 9425 N MERIDIAN STREET  
# 237

City State Zip Code  
INDIANAPOLIS IN 46260

FEC ID number of contributing federal political committee. **C** C00500207

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 27 / 2015

**Transaction ID : SA11C.11359**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**FULBRIGHT & JAWORSKI L L P FEDERAL COMMITTEE**

Mailing Address 1301 MCKINNEY SUITE 5100

City State Zip Code  
HOUSTON TX 77010

FEC ID number of contributing federal political committee. **C** C00149013

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : SA11C.11817**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**GARRET GRAVES FOR CONGRESS**

Mailing Address PO BOX 64845

City State Zip Code  
BATON ROUGE LA 70896

FEC ID number of contributing federal political committee. **C** C00558486

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 15 / 2015

**Transaction ID : SA11C.11123**

Amount of Each Receipt this Period  
1000.00  
GENERAL DEBT RETIREMENT

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
GDF SUEZ ENERGY NORTH AMERICA, INC. POLITICAL ACTION COMMITTEE (GSENA PAC)

Mailing Address 1990 POST OAK BOULEVARD  
SUITE 1900

City HOUSTON State TX Zip Code 77056

FEC ID number of contributing federal political committee. **C** C00375568

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2015

**Transaction ID : SA11C.11257**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
GOOD FUND, THE

Mailing Address PO BOX 3404

City ALEXANDRIA State VA Zip Code 22302

FEC ID number of contributing federal political committee. **C** C00409185

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.11184**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
GOVERNMENT PERSONNEL MUTUAL POLITICAL ACTION COMMITTEE (AKA GPM PAC)

Mailing Address 2211 N E LOOP 410

City SAN ANTONIO State TX Zip Code 78217

FEC ID number of contributing federal political committee. **C** C00236588

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 27 / 2015

**Transaction ID : SA11C.11343**

Amount of Each Receipt this Period  
 500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GUTHRIE FOR CONGRESS**

Mailing Address PO BOX 9639

City State Zip Code  
BOWLING GREEN KY 42102

FEC ID number of contributing federal political committee. **C C00445023**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2015

**Transaction ID : SA11C.11807**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**

Mailing Address 101 CONSTITUTION AVE. NW  
SUITE 500 WEST

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
82.08

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2015

**Transaction ID : SA11C.11867**

Amount of Each Receipt this Period  
82.08

IN-KIND: FACILITY RENTAL/CATERING

**C.** Full Name (Last, First, Middle Initial)  
**HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**

Mailing Address 101 CONSTITUTION AVE. NW  
SUITE 500 WEST

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 27 / 2015

**Transaction ID : SA11C.11428**

Amount of Each Receipt this Period  
1917.92

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**HUDSON FOR CONGRESS**

Mailing Address PO BOX 5053

City State Zip Code  
CONCORD NC 28027

FEC ID number of contributing federal political committee. **C** C00504522

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.11097**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**HUSCH BLACKWELL POLITICAL ACTION COMMITTEE**

Mailing Address 4801 MAIN STREET  
SUITE 1000

City State Zip Code  
KANSAS CITY MO 64112

FEC ID number of contributing federal political committee. **C** C00424382

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11C.11751**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE**

Mailing Address 1615 L STREET, NW  
SUITE 900

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.11109**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (INSURP)

**A.** Mailing Address 20 F STREET, NW SUITE 610

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11C.11585**

Amount of Each Receipt this Period  
 1000.00

Full Name (Last, First, Middle Initial)  
**JEFF PAC**

**B.** Mailing Address 2150 RIVER PLAZA DR. #150

City State Zip Code  
SACRAMENTO CA 95833

FEC ID number of contributing federal political committee. **C** C00489112

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.11188**

Amount of Each Receipt this Period  
 1000.00

Full Name (Last, First, Middle Initial)  
**JOBS, ECONOMY AND BUDGET FUND (JEB FUND)**

**C.** Mailing Address PO BOX 30844

City State Zip Code  
BETHESDA MD 20824

FEC ID number of contributing federal political committee. **C** C00420695

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.11107**

Amount of Each Receipt this Period  
 5000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN CARTER FOR CONGRESS**

Mailing Address 1717 NORTH IH-35  
SUITE 304

City ROUND ROCK State TX Zip Code 78664

FEC ID number of contributing federal political committee. **C** C00371203

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2015

**Transaction ID : SA11C.11606**

Amount of Each Receipt this Period  
 1000.00  
 GENERAL DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**JOHN CARTER FOR CONGRESS**

Mailing Address 1717 NORTH IH-35  
SUITE 304

City ROUND ROCK State TX Zip Code 78664

FEC ID number of contributing federal political committee. **C** C00371203

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2015

**Transaction ID : SA11C.11607**

Amount of Each Receipt this Period  
 1000.00  
 PRIMARY DEBT RETIREMENT

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

Mailing Address PO BOX 853

City EDWARDSVILLE State IL Zip Code 62025

FEC ID number of contributing federal political committee. **C** C00390831

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.11362**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00



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

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

FOR LINE NUMBER: PAGE 89 OF 164  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KEVIN MCCARTHY FOR CONGRESS**

Mailing Address **PO BOX 12667**

City **BAKERSFIELD** State **CA** Zip Code **93389**

FEC ID number of contributing federal political committee. **C C00420935**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
**03 / 27 / 2015**

**Transaction ID : SA11C.11102**

Amount of Each Receipt this Period  
**2000.00**

**B.** Full Name (Last, First, Middle Initial)  
**KEVIN MCCARTHY FOR CONGRESS**

Mailing Address **PO BOX 12667**

City **BAKERSFIELD** State **CA** Zip Code **93389**

FEC ID number of contributing federal political committee. **C C00420935**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
**03 / 27 / 2015**

**Transaction ID : SA11C.11189**

Amount of Each Receipt this Period  
**2000.00**

**C.** Full Name (Last, First, Middle Initial)  
**KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)**

Mailing Address **600 14TH STREET, NW  
SUITE 800**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00236489**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : SA11C.11755**

Amount of Each Receipt this Period  
**1000.00**

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

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

**5000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)**

Mailing Address 600 14TH STREET, NW  
SUITE 800

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00236489**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11C.11834**

Amount of Each Receipt this Period  
4000.00

**B.** Full Name (Last, First, Middle Initial)  
**LIBERTY PROJECT**

Mailing Address PO BOX 53866

City LUBBOCK State TX Zip Code 79453

FEC ID number of contributing federal political committee. **C C00446625**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2015

**Transaction ID : SA11C.11634**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE**

Mailing Address 2121 CRYSTAL DRIVE  
SUITE 100

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11C.11757**

Amount of Each Receipt this Period  
1000.00

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

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

10000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LUKE MESSER FOR CONGRESS**

Mailing Address PO BOX 917

City State Zip Code  
SHELBYVILLE IN 46176

FEC ID number of contributing federal political committee. **C** C00460667

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.11174**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**MAJORITY COMMITTEE PAC--MC PAC**

Mailing Address P.O. BOX 10134

City State Zip Code  
BAKERSFIELD CA 93389

FEC ID number of contributing federal political committee. **C** C00428052

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.11100**

Amount of Each Receipt this Period  
 5000.00

**C.** Full Name (Last, First, Middle Initial)  
**MAJORITY COMMITTEE PAC--MC PAC**

Mailing Address P.O. BOX 10134

City State Zip Code  
BAKERSFIELD CA 93389

FEC ID number of contributing federal political committee. **C** C00428052

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.11190**

Amount of Each Receipt this Period  
 5000.00

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

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

11000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MAKING AMERICA PROSPEROUS PAC**

Mailing Address PO BOX 2485

City Springfield State VA Zip Code 22152

FEC ID number of contributing federal political committee. **C C00445379**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.11104**

Amount of Each Receipt this Period  
 2500.00

7500.00

**B.** Full Name (Last, First, Middle Initial)  
**MARATHON OIL COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE (MEPAC)**

Mailing Address 5555 SAN FELIPE

City HOUSTON State TX Zip Code 77056

FEC ID number of contributing federal political committee. **C C00040568**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 25 / 2015

**Transaction ID : SA11C.11812**

Amount of Each Receipt this Period  
 2500.00

3500.00

**C.** Full Name (Last, First, Middle Initial)  
**MCGUIREWOODS LLP**

Mailing Address ONE JAMES CENTER  
901 E. CARY STREET

City RICHMOND State VA Zip Code 23219

FEC ID number of contributing federal political committee. **C C00225342**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.11112**

Amount of Each Receipt this Period  
 500.00

GENERAL DEBT RETIREMENT

500.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM

Mailing Address 2901 TELESTAR CT.

City Falls Church      State VA      Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer      Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11C.11245**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF REALTORS

Mailing Address 430 N MICHIGAN AVENUE

City Chicago      State IL      Zip Code 60611

FEC ID number of contributing federal political committee. **C** C70002563

Name of Employer      Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : SA11C.11259**

Amount of Each Receipt this Period  
 2500.00

GENERAL DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL CATTLEMEN'S BEEF ASSOCIATION POLITICAL ACTION COMMITTEE (NCBA-PAC)

Mailing Address 9110 EAST NICHOLS AVENUE

City Centennial      State CO      Zip Code 80112

FEC ID number of contributing federal political committee. **C** C00028787

Name of Employer      Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 15 / 2015

**Transaction ID : SA11C.11125**

Amount of Each Receipt this Period  
 5000.00

GENERAL DEBT RETIREMENT

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

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

8500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND**

Mailing Address 11250 WAPLES MILL ROAD

City State Zip Code  
FAIRFAX VA 22030

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 29 / 2015

**Transaction ID : SA11C.11220**

Amount of Each Receipt this Period  
2000.00  
GENERAL DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**NEW PAC**

Mailing Address P.O. BOX 7480

City State Zip Code  
VISALIA CA 93290

FEC ID number of contributing federal political committee. **C** C00398750

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 27 / 2015

**Transaction ID : SA11C.11176**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**NEXTERA ENERGY, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 801 PENNSYLVANIA AVE., NW  
SUITE 220

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00064774

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 16 / 2015

**Transaction ID : SA11C.11734**

Amount of Each Receipt this Period  
1000.00  
GENERAL DEBT RETIREMENT

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NUSTAR ENERGY L.P. (NUSTAR PAC)**

Mailing Address 19003 IH-10 WEST

City SAN ANTONIO      State TX      Zip Code 78257

FEC ID number of contributing federal political committee. **C** C00435321

Name of Employer      Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 03 / 2015

**Transaction ID : SA11C.11347**

Amount of Each Receipt this Period  
 5000.00  
 GENERAL DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**OLSON FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 16381

City SUGAR LAND      State TX      Zip Code 77496

FEC ID number of contributing federal political committee. **C** C00437913

Name of Employer      Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11C.11768**

Amount of Each Receipt this Period  
 2000.00  
 PRIMARY DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**OLSON FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 16381

City SUGAR LAND      State TX      Zip Code 77496

FEC ID number of contributing federal political committee. **C** C00437913

Name of Employer      Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11C.11778**

Amount of Each Receipt this Period  
 2000.00

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

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

9000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**PATRIOTS LEADING A MAJORITY**

Mailing Address 50 S PROVIDENCE ROAD

City State Zip Code  
MEDIA PA 19063

FEC ID number of contributing federal political committee. **C** C00526046

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.11357**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**PEACE THROUGH STRENGTH PAC**

Mailing Address PO BOX 26141

City State Zip Code  
ALEXANDRIA VA 22313

FEC ID number of contributing federal political committee. **C** C00525824

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.11361**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**PG&E CORPORATION EMPLOYEES ENERGYPAC**

Mailing Address 77 BEALE STREET, MAIL CODE: B29H

City State Zip Code  
SAN FRANCISCO CA 94105

FEC ID number of contributing federal political committee. **C** C00177469

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2015

**Transaction ID : SA11C.11605**

Amount of Each Receipt this Period  
 1000.00  
 GENERAL DEBT RETIREMENT

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

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

2500.00



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

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

FOR LINE NUMBER: PAGE 97 OF 164  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
PHARMACEUTICAL CARE MANAGEMENT ASSOCIATION POLITICAL ACTION COMMITTEE (PCMA PAC)

A. Mailing Address 601 PENNSYLVANIA AVENUE NW STE 740

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00388819

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

Transaction ID : SA11C.11409

Amount of Each Receipt this Period  
 500.00

B. Full Name (Last, First, Middle Initial)  
**PIONEER POLITICAL ACTION COMMITTEE**

Mailing Address 701 8TH STREET, NW SUITE 500

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00325357

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date  
 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

Transaction ID : SA11C.11092

Amount of Each Receipt this Period  
 3000.00

C. Full Name (Last, First, Middle Initial)  
**POWER POLITICAL ACTION COMMITTEE OF ENERGY FUTURE HOLDINGS CORP.**

Mailing Address 1601 BRYAN ST.

City State Zip Code  
DALLAS TX 75201

FEC ID number of contributing federal political committee. **C** C00255950

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

Transaction ID : SA11C.11587

Amount of Each Receipt this Period  
 1000.00

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

4500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE I**

Mailing Address 600 13TH STREET, NW  
SUITE 1000

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.11180**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**PROSPERITY ACTION INC.**

Mailing Address 1006 PENDLETON STREET

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00377689

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.11096**

Amount of Each Receipt this Period  
 5000.00

**C.** Full Name (Last, First, Middle Initial)  
**REYNOLDS AMERICAN INC. POLITICAL ACTION COMMITTEE; RAI PAC**

Mailing Address P. O. BOX 718

City WINSTON-SALEM State NC Zip Code 27102

FEC ID number of contributing federal political committee. **C** C00042002

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 24 / 2015

**Transaction ID : SA11C.11229**

Amount of Each Receipt this Period  
 1000.00

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

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

8000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RICK W. ALLEN FOR CONGRESS**

Mailing Address P. O. BOX 338

City State Zip Code  
AUGUSTA GA 30903

FEC ID number of contributing federal political committee. **C** C00504019

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.11178**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**SCALISE FOR CONGRESS**

Mailing Address PO BOX 23219

City State Zip Code  
JEFFERSON LA 70183

FEC ID number of contributing federal political committee. **C** C00394957

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.11110**

Amount of Each Receipt this Period  
 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**SUPPORTING UNITED STATES OF AMERICA'S NEXT LEADERS PAC (SUSAN PAC)**

Mailing Address 9425 N MERIDIAN STREET #237

City State Zip Code  
INDIANAPOLIS IN 46260

FEC ID number of contributing federal political committee. **C** C00564385

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.11186**

Amount of Each Receipt this Period  
 500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC**

Mailing Address 228 S WASHINGTON ST STE 115

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00501478

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11C.11414**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**TESORO PETROLEUM CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 19100 RIDGEWOOD PARKWAY

City State Zip Code  
SAN ANTONIO TX 78259

FEC ID number of contributing federal political committee. **C** C00358366

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2015

**Transaction ID : SA11C.11637**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**TEXANS FOR LAMAR SMITH**

Mailing Address PO BOX 6155

City State Zip Code  
SAN ANTONIO TX 78209

FEC ID number of contributing federal political committee. **C** C00197160

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2015

**Transaction ID : SA11C.11633**

Amount of Each Receipt this Period  
 2000.00  
 GENERAL DEBT RETIREMENT

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**TEXANS FOR LAMAR SMITH**

Mailing Address **PO BOX 6155**

City **SAN ANTONIO** State **TX** Zip Code **78209**

FEC ID number of contributing federal political committee. **C C00197160**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 04 / 2015**

**Transaction ID : SA11C.11635**

Amount of Each Receipt this Period  
**2000.00**

**B.** Full Name (Last, First, Middle Initial)  
**TEXANS FOR LAMAR SMITH**

Mailing Address **PO BOX 6155**

City **SAN ANTONIO** State **TX** Zip Code **78209**

FEC ID number of contributing federal political committee. **C C00197160**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**6000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 04 / 2015**

**Transaction ID : SA11C.11638**

Amount of Each Receipt this Period  
**2000.00**

**PRIMARY DEBT RETIREMENT**

**C.** Full Name (Last, First, Middle Initial)  
**TEXAS CORN PAC OF THE CORN PRODUCERS ASSOCIATION OF TEXAS**

Mailing Address **4205 N INTERSTATE 27**

City **LUBBOCK** State **TX** Zip Code **79403**

FEC ID number of contributing federal political committee. **C C00503847**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 25 / 2015**

**Transaction ID : SA11C.11805**

Amount of Each Receipt this Period  
**1000.00**

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

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

**5000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**TEXAS REPUBLICANS UNITED POLITICAL ACTION COMMITTEE (TRU PAC)**

Mailing Address **815-A BRAZOS STREET**  
**PMB 229**

City **AUSTIN** State **TX** Zip Code **78701**

FEC ID number of contributing federal political committee. **C C00481531**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 29 / 2015**

**Transaction ID : SA11C.11224**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2000.00

**GENERAL DEBT RETIREMENT**

**B.** Full Name (Last, First, Middle Initial)  
**TOYOTA MOTOR NORTH AMERICA INC PAC AKA TOYOTA/LEXUS PAC**

Mailing Address **601 THIRTEENTH STREET NW**  
**STE 910 S**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00542365**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 16 / 2015**

**Transaction ID : SA11C.11668**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

**GENERAL DEBT RETIREMENT**

**C.** Full Name (Last, First, Middle Initial)  
**TRUST PAC TEAM REPUBLICANS FOR UTILIZING SENSIBLE TACTICS**

Mailing Address **228 S. WASHINGTON STREET**  
**SUITE 115**

City **ALEXANDRIA** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C C00330720**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 27 / 2015**

**Transaction ID : SA11C.11090**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2000.00

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

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

\_\_\_\_\_ 5000.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**U.S.-CUBA DEMOCRACY POLITICAL ACTION COMMITTEE**

Mailing Address P.O. BOX 22945

City State Zip Code  
HIALEAH FL 33002

FEC ID number of contributing federal political committee. **C C00387720**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 19 / 2015

**Transaction ID : SA11C.11404**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**UNITED SERVICES AUTOMOBILE ASSOCIATION EMPLOYEE PAC - USAA EMPLOYEE PAC**

Mailing Address 9800 FREDERICKSBURG ROAD

City State Zip Code  
SAN ANTONIO TX 78288

FEC ID number of contributing federal political committee. **C C00164145**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 16 / 2015

**Transaction ID : SA11C.11727**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**US ONCOLOGY INC. NETWORK POLITICAL ACTION COMMITTEE**

Mailing Address 10101 WOODLOCH FOREST DRIVE

City State Zip Code  
THE WOODLANDS TX 77380

FEC ID number of contributing federal political committee. **C C00339655**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 29 / 2015

**Transaction ID : SA11C.11222**

Amount of Each Receipt this Period  
1000.00  
GENERAL DEBT RETIREMENT

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

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

7000.00

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

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

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(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**VALERO ENERGY CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address **ONE VALERO WAY**  
 City State Zip Code  
**SAN ANTONIO TX 78249**

FEC ID number of contributing federal political committee. **C C00109546**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date  
**7500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 31 2015**

**Transaction ID : SA11C.11413**

Amount of Each Receipt this Period  
**2500.00**

B. Full Name (Last, First, Middle Initial)  
**VOICE FOR FREEDOM**

Mailing Address **2700 CUMBERLAND PARKWAY, SUITE 150**  
 City State Zip Code  
**ATLANTA GA 30339**

FEC ID number of contributing federal political committee. **C C00409805**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 27 2015**

**Transaction ID : SA11C.11103**

Amount of Each Receipt this Period  
**2500.00**

C. Full Name (Last, First, Middle Initial)  
**WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT**

Mailing Address **702 S.W. 8TH STREET**  
 City State Zip Code  
**BENTONVILLE AR 72716**

FEC ID number of contributing federal political committee. **C C00093054**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 31 2015**

**Transaction ID : SA11C.11749**

Amount of Each Receipt this Period  
**1000.00**

**GENERAL DEBT RETIREMENT**

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

**6000.00**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WESTMORELAND FOR CONGRESS**

Mailing Address P.O. BOX 458

City State Zip Code  
SHARPSBURG GA 30277

FEC ID number of contributing federal political committee. **C** C00387126

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 27 2015

**Transaction ID : SA11C.11351**

Amount of Each Receipt this Period  
 1000.00

**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)

Election Cycle-to-Date

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

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)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

191500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 164
	<input type="checkbox"/> 11a <input checked="" 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	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CITIZENS TO ELECT PHIL ROE TO CONGRESS**

Mailing Address PO BOX 3218

City JOHNSON CITY State TN Zip Code 37602

FEC ID number of contributing federal political committee. **C** C00444471

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA12.11873**

Amount of Each Receipt this Period  
 500.00

PATRIOT DAY I 2015

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**JEFF MILLER FOR CONGRESS**

Mailing Address P. O. BOX 126

City PENSACOLA State FL Zip Code 32591

FEC ID number of contributing federal political committee. **C** C00366757

Name of Employer Occupation

Receipt For: 2015  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA12.11877**

Amount of Each Receipt this Period  
 1000.00

PATRIOT DAY I 2015

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**LATTA FOR CONGRESS**

Mailing Address PO BOX 106

City BOWLING GREEN State OH Zip Code 43402

FEC ID number of contributing federal political committee. **C** C00438697

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA12.11875**

Amount of Each Receipt this Period  
 1000.00

PATRIOT DAY I 2015

**[MEMO ITEM]**

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 164
	<input type="checkbox"/> 11a <input checked="" 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	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Mailing Address 320 FIRST STREET SE

City State Zip Code  
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C** C00075820

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA12.11871**

Amount of Each Receipt this Period  
5000.00

PATRIOT DAY I 2015

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**NEW PIONEERS PAC**

Mailing Address 228 S WASHINGTON ST STE 115

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00459123

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA12.11869**

Amount of Each Receipt this Period  
5000.00

PATRIOT DAY I 2015

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**PATRIOT DAY I 2015**

Mailing Address 228 S WASHINGTON ST STE 115

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** c00573477

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
11941.65

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA12.11881**

Amount of Each Receipt this Period  
11941.65

JFC: SEE MEMO ENTRIES

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

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

11941.65

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 164
	<input type="checkbox"/> 11a <input checked="" 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	

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RIBBLE FOR CONGRESS**

Mailing Address PO BOX 7200

City State Zip Code  
APPLETON WI 54912

FEC ID number of contributing federal political committee. **C** C00463620

Name of Employer Occupation

Receipt For: 2015  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 31 2015

**Transaction ID : SA12.11879**

Amount of Each Receipt this Period  
 1000.00

PATRIOT DAY I 2015

**[MEMO ITEM]**

**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)

Election Cycle-to-Date

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

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)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

0.00

11941.65

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 164	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SMART MEDIA GROUP LLC**

Mailing Address **1427 LESLIE AVENUE**  
**SUITE 100**

City **ALEXANDRIA** State **VA** Zip Code **22301**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**8197.01**

Date of Receipt  

M	M	
03		

/ 

D	D	
31		

/ 

Y	Y	Y	Y	Y	Y

2015

**Transaction ID : SA14.11838**

Amount of Each Receipt this Period  
**8197.01**

**VENDOR REFUND: OVERPAYMENT**

**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)

Election Cycle-to-Date

Date of Receipt  

M	M	

/ 

D	D	

/ 

Y	Y	Y	Y	Y	Y

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)

Election Cycle-to-Date

Date of Receipt  

M	M	

/ 

D	D	

/ 

Y	Y	Y	Y	Y	Y

Amount of Each Receipt this Period

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

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

**8197.01**

**8197.01**

**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 110 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. 7-ELEVEN</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address 917 N LAMAR		Amount of Each Disbursement this Period 29.57
City AUSTIN State TX Zip Code 78703	Purpose of Disbursement CREDIT CARD PAYMENT 2/17: MEETING EXPENSE: MEALS	
Candidate Name	Category/Type	Transaction ID : SB17.10995 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AUSTIN AGRELLA</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2015
Mailing Address 1 TRINITY PL		Amount of Each Disbursement this Period 857.09
City SAN ANTONIO State TX Zip Code 78212	Purpose of Disbursement INSPIRITY 2/26: PAYROLL	
Candidate Name	Category/Type	Transaction ID : SB17.11076 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. AUSTIN AGRELLA</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2015
Mailing Address 1 TRINITY PL		Amount of Each Disbursement this Period 454.67
City SAN ANTONIO State TX Zip Code 78212	Purpose of Disbursement INSPIRITY 2/26: PAYROLL	
Candidate Name	Category/Type	Transaction ID : SB17.11080 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 111 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 200 VESEY ST		Amount of Each Disbursement this Period 2888.96 <b>Transaction ID : SB17.10912</b>
City NEW YORK State NY Zip Code 10285	Purpose of Disbursement CREDIT CARD PAYMENT: SEE MEMO ENTRIES	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address 200 VESEY ST		Amount of Each Disbursement this Period 2055.83 <b>Transaction ID : SB17.10900</b>
City NEW YORK State NY Zip Code 10285	Purpose of Disbursement CREDIT CARD PAYMENT: SEE MEMO ENTRIES	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 200 VESEY ST		Amount of Each Disbursement this Period 2769.80 <b>Transaction ID : SB17.10888</b>
City NEW YORK State NY Zip Code 10285	Purpose of Disbursement CREDIT CARD PAYMENT: SEE MEMO ENTRIES	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7714.59
<b>TOTAL</b> This Period (last page this line number only).....	

**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 112 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 200 VESEY ST		Amount of Each Disbursement this Period 9.95
City NEW YORK State NY Zip Code 10285	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: TRAVEL: INSURANCE	
Candidate Name		Transaction ID : SB17.11020 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 200 VESEY ST		Amount of Each Disbursement this Period 9.95
City NEW YORK State NY Zip Code 10285	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: TRAVEL: INSURANCE	
Candidate Name		Transaction ID : SB17.11057 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 200 VESEY ST		Amount of Each Disbursement this Period 9.95
City NEW YORK State NY Zip Code 10285	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: TRAVEL: INSURANCE	
Candidate Name		Transaction ID : SB17.11058 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9.00
<b>TOTAL</b> This Period (last page this line number only).....	



**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 113 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AMSTAR</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 823 CONGRESS AVE		Amount of Each Disbursement this Period 12.50
City AUSTIN State TX Zip Code 78734	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: PARKING SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.10975 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AMTRAK</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 60 MASSACHUSETTS AVE NW		Amount of Each Disbursement this Period 39.00
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: TRAVEL: RAIL	
Candidate Name	Category/Type	Transaction ID : SB17.10958 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. AMTRAK</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 60 MASSACHUSETTS AVE NW		Amount of Each Disbursement this Period -17.00
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: TRAVEL: RAIL	
Candidate Name	Category/Type	Transaction ID : SB17.11021 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 114 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AMTRAK</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 60 MASSACHUSETTS AVE NW		Amount of Each Disbursement this Period 4313.00
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: TRAVEL: RAIL	
Candidate Name	Category/Type	Transaction ID : SB17.11022 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AMTRAK</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 60 MASSACHUSETTS AVE NW		Amount of Each Disbursement this Period 6.00
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: TRAVEL: RAIL	
Candidate Name	Category/Type	Transaction ID : SB17.11023 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. ARENA ONLINE</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2015
Mailing Address 1780 WEST SEQUOIA CIRCLE		Amount of Each Disbursement this Period 4313.00
City SALT LAKE CITY State UT Zip Code 84104	Purpose of Disbursement DIGITAL CONSULTING	
Candidate Name	Category/Type	Transaction ID : SB17.10908
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4313.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 115 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
**A. ARENA ONLINE**

Mailing Address 1780 WEST SEQUOIA CIRCLE

City SALT LAKE CITY State UT Zip Code 84104

Purpose of Disbursement DIGITAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 23 / 2015

Amount of Each Disbursement this Period: 410.00

Transaction ID : SB17.10893

Category/Type

Full Name (Last, First, Middle Initial)  
**B. AT&T**

Mailing Address 208 S AKARD ST

City DALLAS State TX Zip Code 75202

Purpose of Disbursement CREDIT CARD PAYMENT 2/17: MOBILE PHONE EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 17 / 2015

Amount of Each Disbursement this Period: 154.05

Transaction ID : SB17.11004

[MEMO ITEM]

Category/Type

Full Name (Last, First, Middle Initial)  
**C. AUSTIN CONVENTION CENTER**

Mailing Address 500 E CESAR CHAVEZ ST

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement CREDIT CARD PAYMENT 2/17: PARKING SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 17 / 2015

Amount of Each Disbursement this Period: 7.00

Transaction ID : SB17.11010

[MEMO ITEM]

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 410.00

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

**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 116 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BASECAMP</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address INFORMATION REQUESTED		Amount of Each Disbursement this Period 49.00
City CHICAGO	State IL	
Zip Code 60601	Purpose of Disbursement CREDIT CARD PAYMENT 2/17: ONLINE SUBSCRIPTIONS	Transaction ID : SB17.11006
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BASECAMP</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address INFORMATION REQUESTED		Amount of Each Disbursement this Period 49.00
City CHICAGO	State IL	
Zip Code 60601	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: ONLINE SUBSCRIPTIONS	Transaction ID : SB17.11072
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BUDGET RENT A CAR</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 7020 CEDAR SPRINGS RD		Amount of Each Disbursement this Period 25.15
City DALLAS	State TX	
Zip Code 75235	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: TRAVEL: GROUND TRANSPORTATION	Transaction ID : SB17.11069
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 117 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CANTINA LAREDO</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 4546 BELT LINE RD		Amount of Each Disbursement this Period 55.31
City DALLAS State TX Zip Code 75244	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: MEETING EXPENSE: MEALS	
Candidate Name		Transaction ID : SB17.11048 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 300 FIRST ST SE		Amount of Each Disbursement this Period 400.00
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: MEETING EXPENSE: MEALS	
Candidate Name		Transaction ID : SB17.11060 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. CARE OF ADVANTAGE INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 2300 CLARENDON BLVD SUITE 303		Amount of Each Disbursement this Period 5703.02
City ARLINGTON State VA Zip Code 22201	Purpose of Disbursement POLLING CONSULTING	
Candidate Name		Transaction ID : SB17.10913
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5703.02
<b>TOTAL</b> This Period (last page this line number only).....	

**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 118 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CENTURY BAR &amp; GRILL</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 209 W HOLLAND AVE		Amount of Each Disbursement this Period 27.65
City ALPINE State TX Zip Code 79830	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: MEETING EXPENSE: MEALS	
Candidate Name	Category/Type	Transaction ID : SB17.11043 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. CHEVRON</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 1901 SW FRONTAGE RD		Amount of Each Disbursement this Period 29.87
City VAN HORN State TX Zip Code 79885	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: TRAVEL: FUEL	
Candidate Name	Category/Type	Transaction ID : SB17.10937 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. CHICK-FIL-A</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 18310 BLANCO RD		Amount of Each Disbursement this Period 13.18
City SAN ANTONIO State TX Zip Code 78258	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: MEETING EXPENSES: MEALS	
Candidate Name	Category/Type	Transaction ID : SB17.10976 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 119 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CHICK-FIL-A</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 18310 BLANCO RD		Amount of Each Disbursement this Period 13.69
City SAN ANTONIO State TX Zip Code 78258	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: MEETING EXPENSE: MEALS	
Candidate Name	Category/Type	Transaction ID : SB17.11070 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. CHILI'S</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 2415 VETERANS BLVD		Amount of Each Disbursement this Period 34.78
City DEL RIO State TX Zip Code 78840	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: MEETING EXPENSES: MEALS	
Candidate Name	Category/Type	Transaction ID : SB17.10947 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. COCHINEAL</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 107 W SAN ANTONIO ST		Amount of Each Disbursement this Period 152.62
City MARFA State TX Zip Code 79843	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: MEETING EXPENSES: MEALS	
Candidate Name	Category/Type	Transaction ID : SB17.10939 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 120 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
**A. CORNER STORE**

Mailing Address 16555 HUEBNER RD

City SAN ANTONIO State TX Zip Code 78248

Purpose of Disbursement  
CREDIT CARD PAYMENT 3/13: MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 13 / 2015

Amount of Each Disbursement this Period: 43.79

Transaction ID : SB17.11028

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**B. COURTYARD BY MARIOTT**

Mailing Address 1505 TRADEWINDS BLVD

City MIDLAND State TX Zip Code 79707

Purpose of Disbursement  
CREDIT CARD PAYMENT 3/13: TRAVEL: LODGING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 13 / 2015

Amount of Each Disbursement this Period: 17.48

Transaction ID : SB17.11050

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**C. DAIRY QUEEN**

Mailing Address E HWY 67

City BIG LAKE State TX Zip Code 76932

Purpose of Disbursement  
CREDIT CARD PAYMENT 1/13: MEETING EXPENSES: MEALS

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 13 / 2015

Amount of Each Disbursement this Period: 16.10

Transaction ID : SB17.10934

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... 0.00

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



**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 121 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. DESIGN CUISINE</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address 2659 SOUTH SHIRLINGTON ROAD		Amount of Each Disbursement this Period 1132.00
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement CREDIT CARD PAYMENT 2/17: MEETING EXPENSE: MEALS	
Candidate Name	Category/Type	Transaction ID : SB17.10985 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. DESIGN CUISINE</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2015
Mailing Address 2659 SOUTH SHIRLINGTON ROAD		Amount of Each Disbursement this Period 101.26
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement MEETING EXPENSE: MEALS	
Candidate Name	Category/Type	Transaction ID : SB17.10895
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. DIPLOMAT CAB</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 10221 DESERT SANDS ST		Amount of Each Disbursement this Period 56.70
City SAN ANTONIO State TX Zip Code 78216	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: TRAVEL: GROUND TRANSPORTATION	
Candidate Name	Category/Type	Transaction ID : SB17.11025 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	101.26
<b>TOTAL</b> This Period (last page this line number only).....	

**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 122 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. DOUBLETREE HOTEL</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 600 N EL PASO ST		Amount of Each Disbursement this Period 21.27
City EL PASO State TX Zip Code 79901	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: TRAVEL: LODGING	
Candidate Name	Category/Type	Transaction ID : SB17.11046 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. EASY INSIGHT LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 621 17TH ST STE 825		Amount of Each Disbursement this Period 50.00
City DENVER State CO Zip Code 80202	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: ONLINE SUBSCRIPTIONS	
Candidate Name	Category/Type	Transaction ID : SB17.10929 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. EASY INSIGHT LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address 621 17TH ST STE 825		Amount of Each Disbursement this Period 50.00
City DENVER State CO Zip Code 80202	Purpose of Disbursement CREDIT CARD PAYMENT 2/17: ONLINE SUBSCRIPTIONS	
Candidate Name	Category/Type	Transaction ID : SB17.10983 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**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 123 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. EASY INSIGHT LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 621 17TH ST STE 825		Amount of Each Disbursement this Period 45.00
City DENVER	State CO	
Zip Code 80202	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: ONLINE SUBSCRIPTIONS	Transaction ID : SB17.11017
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ENGAGE</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2015
Mailing Address 814 KING ST STE 400		Amount of Each Disbursement this Period 45.51
City ALEXANDRIA	State VA	
Zip Code 22314	Purpose of Disbursement MERCHANT FEES	Transaction ID : SB17.10896
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ENTERPRISE RENT A CAR</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 600 CORPORATE PARK DR		Amount of Each Disbursement this Period 48.56
City ST LOUIS	State MO	
Zip Code 63105	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: TRAVEL: GROUND TRANSPORTATION	Transaction ID : SB17.11051
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	45.51
<b>TOTAL</b> This Period (last page this line number only).....	

**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 124 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. EXXONMOBIL</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 5959 LAS COLINAS BLVD		Amount of Each Disbursement this Period 48.32
City IRVING State TX Zip Code 95039	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: TRAVEL: FUEL	
Candidate Name	Category/Type	Transaction ID : SB17.10922 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. EXXONMOBIL</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 5959 LAS COLINAS BLVD		Amount of Each Disbursement this Period 26.74
City IRVING State TX Zip Code 95039	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: TRAVEL: FUEL	
Candidate Name	Category/Type	Transaction ID : SB17.10942 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. EXXONMOBIL</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 5959 LAS COLINAS BLVD		Amount of Each Disbursement this Period 23.18
City IRVING State TX Zip Code 95039	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: TRAVEL: FUEL	
Candidate Name	Category/Type	Transaction ID : SB17.10954 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 125 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. EXXONMOBIL</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 5959 LAS COLINAS BLVD		Amount of Each Disbursement this Period 1.11
City IRVING State TX Zip Code 95039	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: TRAVEL: FUEL	
Candidate Name	Category/Type	Transaction ID : SB17.10955 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. EXXONMOBIL</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 5959 LAS COLINAS BLVD		Amount of Each Disbursement this Period 40.53
City IRVING State TX Zip Code 95039	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: TRAVEL: FUEL	
Candidate Name	Category/Type	Transaction ID : SB17.10970 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. EXXONMOBIL</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 5959 LAS COLINAS BLVD		Amount of Each Disbursement this Period 44.92
City IRVING State TX Zip Code 95039	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: TRAVEL: FUEL	
Candidate Name	Category/Type	Transaction ID : SB17.11054 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 126 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FREDERICKS BROADWAY</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015	
Mailing Address 7701 BROADWAY ST #20			Amount of Each Disbursement this Period 70.18	
City SAN ANTONIO	State TX	Zip Code 78209	Transaction ID : SB17.11027	
Purpose of Disbursement CREDIT CARD PAYMENT 3/13: MEETING EXPENSE: MEALS			[MEMO ITEM]	
Candidate Name			Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. GOOGLE</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015	
Mailing Address 1600 AMPHITHEATRE PARKWAY			Amount of Each Disbursement this Period 58.50	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Transaction ID : SB17.10923	
Purpose of Disbursement CREDIT CARD PAYMENT 1/13: ONLINE ADVERTISING			[MEMO ITEM]	
Candidate Name			Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. GOOGLE</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015	
Mailing Address 1600 AMPHITHEATRE PARKWAY			Amount of Each Disbursement this Period 1.99	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Transaction ID : SB17.10966	
Purpose of Disbursement CREDIT CARD PAYMENT 1/13: ONLINE ADVERTISING			[MEMO ITEM]	
Candidate Name			Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 127 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. GOOGLE</b>		Date of Disbursement MM / DD / YYYY 02 / 17 / 2015
Mailing Address 1600 AMPHITHEATRE PARKWAY		Amount of Each Disbursement this Period 60.00
City MOUNTAIN VIEW State CA Zip Code 94043	Purpose of Disbursement CREDIT CARD PAYMENT 2/17: ONLINE ADVERTISING	
Candidate Name	Category/Type	Transaction ID : SB17.10982 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. GOOGLE</b>		Date of Disbursement MM / DD / YYYY 02 / 17 / 2015
Mailing Address 1600 AMPHITHEATRE PARKWAY		Amount of Each Disbursement this Period 1.99
City MOUNTAIN VIEW State CA Zip Code 94043	Purpose of Disbursement CREDIT CARD PAYMENT 2/17: ONLINE ADVERTISING	
Candidate Name	Category/Type	Transaction ID : SB17.10988 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. GOOGLE</b>		Date of Disbursement MM / DD / YYYY 03 / 13 / 2015
Mailing Address 1600 AMPHITHEATRE PARKWAY		Amount of Each Disbursement this Period 60.00
City MOUNTAIN VIEW State CA Zip Code 94043	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: ONLINE ADVERTISING	
Candidate Name	Category/Type	Transaction ID : SB17.11016 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 128 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. GOOGLE</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 1600 AMPHITHEATRE PARKWAY		Amount of Each Disbursement this Period 1.99
City MOUNTAIN VIEW State CA Zip Code 94043	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: ONLINE ADVERTISING	
Candidate Name	Category/Type	Transaction ID : SB17.11038 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. HAMPTON INN</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 200 SAN JACINTO BLVD		Amount of Each Disbursement this Period 171.35
City AUSTIN State TX Zip Code 78701	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: TRAVEL: LODGING	
Candidate Name	Category/Type	Transaction ID : SB17.10972 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. HAMPTON INN</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 200 SAN JACINTO BLVD		Amount of Each Disbursement this Period 227.36
City AUSTIN State TX Zip Code 78701	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: TRAVEL: LODGING	
Candidate Name	Category/Type	Transaction ID : SB17.10973 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	



**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 129 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. HEB CAR WASH</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address 10718 POTRANCO RD		Amount of Each Disbursement this Period 21.92
City SAN ANTONIO State TX Zip Code 78245	Purpose of Disbursement CREDIT CARD PAYMENT 2/17: TRAVEL: FUEL	
Candidate Name	Category/Type	Transaction ID : SB17.11008 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. HOLIDAY INN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 1308 AVE E		Amount of Each Disbursement this Period 217.75
City OZONA State TX Zip Code 76943	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: TRAVEL: LODGING	
Candidate Name	Category/Type	Transaction ID : SB17.10931 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. HOLIDAY INN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 1308 AVE E		Amount of Each Disbursement this Period 217.75
City OZONA State TX Zip Code 76943	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: TRAVEL: LODGING	
Candidate Name	Category/Type	Transaction ID : SB17.10932 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 130 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. JUSTIN HOLLIS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2015
Mailing Address 8918 RACHELS BRANCH		Amount of Each Disbursement this Period 2244.31 <b>Transaction ID : SB17.10907</b>
City SAN ANTONIO State TX Zip Code 78254	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JUSTIN HOLLIS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 8918 RACHELS BRANCH		Amount of Each Disbursement this Period 2244.31 <b>Transaction ID : SB17.10904</b>
City SAN ANTONIO State TX Zip Code 78254	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JUSTIN HOLLIS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 8918 RACHELS BRANCH		Amount of Each Disbursement this Period 20000.00 <b>Transaction ID : SB17.10905</b>
City SAN ANTONIO State TX Zip Code 78254	Purpose of Disbursement STRATEGY CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	24488.62
<b>TOTAL</b> This Period (last page this line number only).....	

**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 131 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. JUSTIN HOLLIS</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2015
Mailing Address 8918 RACHELS BRANCH		Amount of Each Disbursement this Period 4186.02
City SAN ANTONIO	State TX	
Zip Code 78254	Purpose of Disbursement INSPERITY 2/26: PAYROLL	Transaction ID : SB17.11074
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JUSTIN HOLLIS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2015
Mailing Address 8918 RACHELS BRANCH		Amount of Each Disbursement this Period 2244.31
City SAN ANTONIO	State TX	
Zip Code 78254	Purpose of Disbursement INSPERITY 2/26: PAYROLL	Transaction ID : SB17.11079
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2015
Mailing Address 101 CONSTITUTION AVE. NW SUITE 500 WEST		Amount of Each Disbursement this Period 82.08
City WASHINGTON	State DC	
Zip Code 20001	Purpose of Disbursement IN-KIND: FACILITY RENTAL/CATERING	Transaction ID : SB17.11868
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	82.08
<b>TOTAL</b> This Period (last page this line number only).....	

**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 132 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. HOTEL PAISANO</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 207 HIGHLAND ST		Amount of Each Disbursement this Period 192.10
City MARFA State TX Zip Code 79843	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: TRAVEL: LODGING	
Candidate Name		Transaction ID : SB17.10944 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. HOTELS.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 10440 N CENTRAL EXPWY STE 400		Amount of Each Disbursement this Period 144.39
City DALLAS State TX Zip Code 75231	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: TRAVEL: LODGING	
Candidate Name		Transaction ID : SB17.11037 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. HOTELS.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 10440 N CENTRAL EXPWY STE 400		Amount of Each Disbursement this Period 100.28
City DALLAS State TX Zip Code 75231	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: TRAVEL: LODGING	
Candidate Name		Transaction ID : SB17.11061 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 133 OF 164			
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. HUDSON NEWS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 8008 CEDAR SPRINGS RD #21		Amount of Each Disbursement this Period 10.70
City DALLAS State TX Zip Code 75235	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: OFFICE SUPPLIES	
Candidate Name		Transaction ID : SB17.11066
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. ICONTRIBUTE</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2015
Mailing Address 725 8TH STREET SE		Amount of Each Disbursement this Period 12.00
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Transaction ID : SB17.10917
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. ICONTRIBUTE</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2015
Mailing Address 725 8TH STREET SE		Amount of Each Disbursement this Period 32.00
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Transaction ID : SB17.10918
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	44.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 134 OF 164			
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ICONTRIBUTE</b>		Date of Disbursement
Mailing Address 725 8TH STREET SE		M M / D D / Y Y Y Y 02 / 02 / 2015
City	State	Zip Code
WASHINGTON	DC	20003
Purpose of Disbursement MERCHANT FEES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period	
	15.00	
Transaction ID : SB17.10902		
Office Sought:	House	Disbursement For: 2014
	Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
	President	<input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. ICONTRIBUTE</b>		Date of Disbursement
Mailing Address 725 8TH STREET SE		M M / D D / Y Y Y Y 02 / 03 / 2015
City	State	Zip Code
WASHINGTON	DC	20003
Purpose of Disbursement MERCHANT FEES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period	
	152.61	
Transaction ID : SB17.10901		
Office Sought:	House	Disbursement For: 2014
	Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
	President	<input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. ICONTRIBUTE</b>		Date of Disbursement
Mailing Address 725 8TH STREET SE		M M / D D / Y Y Y Y 03 / 02 / 2015
City	State	Zip Code
WASHINGTON	DC	20003
Purpose of Disbursement MERCHANT FEES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period	
	459.59	
Transaction ID : SB17.10891		
Office Sought:	House	Disbursement For: 2014
	Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
	President	<input type="checkbox"/> Other (specify)
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	627.20
<b>TOTAL</b> This Period (last page this line number only).....	

**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 135 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ICONTRIBUTE</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2015
Mailing Address 725 8TH STREET SE		Amount of Each Disbursement this Period 16.90 <b>Transaction ID : SB17.10890</b>
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. INSPERITY</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2015
Mailing Address 19001 CRESCENT SPRINGS DR.		Amount of Each Disbursement this Period 895.27 <b>Transaction ID : SB17.10906</b>
City KINGSWOOD State TX Zip Code 77339	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. INSPERITY</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 19001 CRESCENT SPRINGS DR.		Amount of Each Disbursement this Period 825.45 <b>Transaction ID : SB17.10903</b>
City KINGSWOOD State TX Zip Code 77339	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1737.62
<b>TOTAL</b> This Period (last page this line number only).....	

**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 136 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. INSPERITY</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2015
Mailing Address 19001 CRESCENT SPRINGS DR.		Amount of Each Disbursement this Period 7113.35 <b>Transaction ID : SB17.10892</b>
City KINGSWOOD	State TX	
Zip Code 77339	Purpose of Disbursement PAYROLL: SEE MEMO ENTRIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. INSPERITY</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2015
Mailing Address 19001 CRESCENT SPRINGS DR.		Amount of Each Disbursement this Period 2070.24 <b>Transaction ID : SB17.11077</b> <b>[MEMO ITEM]</b>
City KINGSWOOD	State TX	
Zip Code 77339	Purpose of Disbursement INSPERITY 2/26: PAYROLL TAXES & FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. INSPERITY</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2015
Mailing Address 19001 CRESCENT SPRINGS DR.		Amount of Each Disbursement this Period 3583.93 <b>Transaction ID : SB17.10889</b>
City KINGSWOOD	State TX	
Zip Code 77339	Purpose of Disbursement PAYROLL: SEE MEMO ENTRIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10697.28
<b>TOTAL</b> This Period (last page this line number only).....	



**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 137 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. INSPERITY</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2015
Mailing Address 19001 CRESCENT SPRINGS DR.		Amount of Each Disbursement this Period 884.95
City KINGSWOOD	State TX	
Zip Code 77339	Purpose of Disbursement INSPERITY 3/13: PAYROLL TAXES & FEES	Transaction ID : SB17.11078
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JR'S DRIVE THRU</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 1710 GRAND AVE		Amount of Each Disbursement this Period 20.00
City BIG WELLS	State TX	
Zip Code 78830	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: MEETING EXPENSES: MEALS	Transaction ID : SB17.10953
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. L &amp; J CAFE</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 3622 E MISSOURI AVE		Amount of Each Disbursement this Period 44.44
City EL PASO	State TX	
Zip Code 79903	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: MEETING EXPENSE: MEALS	Transaction ID : SB17.11041
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 138 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. LA QUINTA INN &amp; SUITES</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 101 S FRONTAGE RD		Amount of Each Disbursement this Period 216.33
City State Zip Code PECOS TX 79772	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: TRAVEL: LODGING	
Candidate Name		Transaction ID : SB17.10941 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. MAILCHIMP</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 675 PONCE DE LEON AVE NE STE 5000		Amount of Each Disbursement this Period 75.00
City State Zip Code ATLANTA GA 30308	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: ONLINE SUBSCRIPTIONS	
Candidate Name		Transaction ID : SB17.10935 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. MAILCHIMP</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address 675 PONCE DE LEON AVE NE STE 5000		Amount of Each Disbursement this Period 75.00
City State Zip Code ATLANTA GA 30308	Purpose of Disbursement CREDIT CARD PAYMENT 2/17: ONLINE SUBSCRIPTIONS	
Candidate Name		Transaction ID : SB17.10984 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 139 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MAILCHIMP</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 675 PONCE DE LEON AVE NE STE 5000		Amount of Each Disbursement this Period 75.00
City ATLANTA State GA Zip Code 30308	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: ONLINE SUBSCRIPTIONS	
Candidate Name	Category/Type	<b>Transaction ID : SB17.11018</b> <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. MISSION BIENVENIDOS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2015
Mailing Address 1606 20TH ST NW		Amount of Each Disbursement this Period 3116.22
City WASHINGTON State DC Zip Code 20009	Purpose of Disbursement FACILITY RENTAL/CATERING	
Candidate Name	Category/Type	<b>Transaction ID : SB17.10910</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. MYFAX SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 6922 HOLLYWOOD BLVD #500		Amount of Each Disbursement this Period 10.00
City LOS ANGELES State CA Zip Code 90028	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: ONLINE SUBSCRIPTIONS	
Candidate Name	Category/Type	<b>Transaction ID : SB17.10919</b> <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3116.22
<b>TOTAL</b> This Period (last page this line number only).....	

**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 140 OF 164			
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MYFAX SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 6922 HOLLYWOOD BLVD #500		Amount of Each Disbursement this Period 10.00
City LOS ANGELES State CA Zip Code 90028	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: ONLINE SUBSCRIPTIONS	
Candidate Name		Transaction ID : SB17.10980 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. MYFAX SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address 6922 HOLLYWOOD BLVD #500		Amount of Each Disbursement this Period 10.00
City LOS ANGELES State CA Zip Code 90028	Purpose of Disbursement CREDIT CARD PAYMENT 2/17: ONLINE SUBSCRIPTIONS	
Candidate Name		Transaction ID : SB17.11011 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. PICO CONVENIENCE STORE</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 108 W MILITARY HWY		Amount of Each Disbursement this Period 17.64
City BRACKETVILLE State TX Zip Code 78832	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: MEETING EXPENSES: MEALS	
Candidate Name		Transaction ID : SB17.10927 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 141 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. POTBELLY</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 1900 L ST NW		Amount of Each Disbursement this Period 12.65
City WASHINGTON	State DC Zip Code 20036	
Purpose of Disbursement CREDIT CARD PAYMENT 1/13: MEETING EXPENSES: MEALS		Transaction ID : SB17.10965
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. QUIKTRIP</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 3230 W MOCKINGBIRD LN		Amount of Each Disbursement this Period 8.54
City DALLAS	State TX Zip Code 75235	
Purpose of Disbursement CREDIT CARD PAYMENT 3/13: MEETING EXPENSE: MEALS		Transaction ID : SB17.11064
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. RACKSPACE</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 1 FANATICAL PL		Amount of Each Disbursement this Period 30.71
City WINDCREST	State TX Zip Code 78218	
Purpose of Disbursement CREDIT CARD PAYMENT 1/13: WEB HOSTING		Transaction ID : SB17.10969
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 142 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. RACKSPACE</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address 1 FANATICAL PL		Amount of Each Disbursement this Period 31.72
City WINDCREST	State TX	
Zip Code 78218	Purpose of Disbursement CREDIT CARD PAYMENT 2/17: WEB HOSTING	Transaction ID : SB17.10989
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. RACKSPACE</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 1 FANATICAL PL		Amount of Each Disbursement this Period 31.72
City WINDCREST	State TX	
Zip Code 78218	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: WEB HOSTING	Transaction ID : SB17.11039
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. RED CURVE SOLUTIONS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 500 CUMMINGS CENTER SUITE 4400		Amount of Each Disbursement this Period 2776.42
City BEVERLY	State MA	
Zip Code 01915	Purpose of Disbursement COMPLIANCE CONSULTING	Transaction ID : SB17.10914
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2776.42
<b>TOTAL</b> This Period (last page this line number only).....	

**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 143 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. RED CURVE SOLUTIONS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2015
Mailing Address 500 CUMMINGS CENTER SUITE 4400		Amount of Each Disbursement this Period 2416.61
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement COMPLIANCE CONSULTING	
Candidate Name		Transaction ID : SB17.10911
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. RED CURVE SOLUTIONS</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2015
Mailing Address 500 CUMMINGS CENTER SUITE 4400		Amount of Each Disbursement this Period 2475.25
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement COMPLIANCE CONSULTING	
Candidate Name		Transaction ID : SB17.10897
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. RED DOG ICE HOUSE</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 2418 N 1ST ST		Amount of Each Disbursement this Period 73.22
City CARRIZO SPRINGS State TX Zip Code 78834	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: MEETING EXPENSES: MEALS	
Candidate Name		Transaction ID : SB17.10957
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4891.86
<b>TOTAL</b> This Period (last page this line number only).....	

**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 144 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. RIATA INN</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 1500 US-90		Amount of Each Disbursement this Period 87.01
City MARFA State TX Zip Code 79843	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: TRAVEL: LODGING	
Candidate Name	Category/Type	Transaction ID : SB17.11045 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. RIVERCENTER MALL</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 849 E COMMERCE ST		Amount of Each Disbursement this Period 15.00
City SAN ANTONIO State TX Zip Code 78205	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: PARKING SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.11014 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. RUDY'S DEL RIO</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 330 BRADDIE DR		Amount of Each Disbursement this Period 19.13
City DEL RIO State TX Zip Code 78840	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: TRAVEL: FUEL	
Candidate Name	Category/Type	Transaction ID : SB17.11056 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	



**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 145 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SAMS BURGER JOINT</b>		Date of Disbursement MM / DD / YYYY 02 / 17 / 2015
Mailing Address 330 E GRAYSON ST		Amount of Each Disbursement this Period \$ 27.69
City SAN ANTONIO	State TX	
Zip Code 78215		Transaction ID : SB17.10997
Purpose of Disbursement CREDIT CARD PAYMENT 2/17: MEETING EXPENSE: MEALS		
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. SAT AIRPORT PARKING</b>		Date of Disbursement MM / DD / YYYY 01 / 13 / 2015
Mailing Address 9800 AIRPORT BLVD		Amount of Each Disbursement this Period \$ 24.00
City SAN ANTONIO	State TX	
Zip Code 78216		Transaction ID : SB17.10961
Purpose of Disbursement CREDIT CARD PAYMENT 1/13: PARKING SERVICES		
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. SAT AIRPORT PARKING</b>		Date of Disbursement MM / DD / YYYY 03 / 13 / 2015
Mailing Address 9800 AIRPORT BLVD		Amount of Each Disbursement this Period \$ 15.00
City SAN ANTONIO	State TX	
Zip Code 78216		Transaction ID : SB17.11067
Purpose of Disbursement CREDIT CARD PAYMENT 3/13: PARKING SERVICES		
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	\$ 0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 146 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SHELL OIL</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 910 LOUISIANA ST		Amount of Each Disbursement this Period 28.42
City HOUSTON State TX Zip Code 77002	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: TRAVEL: FUEL	
Candidate Name		Transaction ID : SB17.10945 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SHELL OIL</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 910 LOUISIANA ST		Amount of Each Disbursement this Period 40.02
City HOUSTON State TX Zip Code 77002	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: TRAVEL: FUEL	
Candidate Name		Transaction ID : SB17.10979 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SOUTHWEST</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 2702 LOVE FIELD DR		Amount of Each Disbursement this Period 8.00
City DALLAS State TX Zip Code 75235	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: BROADBAND SERVICES	
Candidate Name		Transaction ID : SB17.10959 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 147 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SOUTHWEST</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address 2702 LOVE FIELD DR		Amount of Each Disbursement this Period 8.00
City DALLAS State TX Zip Code 75235	Purpose of Disbursement CREDIT CARD PAYMENT 2/17: BROADBAND SERVICES	
Candidate Name		Transaction ID : SB17.10990 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SOUTHWEST</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address 2702 LOVE FIELD DR		Amount of Each Disbursement this Period 8.00
City DALLAS State TX Zip Code 75235	Purpose of Disbursement CREDIT CARD PAYMENT 2/17: BROADBAND SERVICES	
Candidate Name		Transaction ID : SB17.10998 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SOUTHWEST</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 2702 LOVE FIELD DR		Amount of Each Disbursement this Period 8.00
City DALLAS State TX Zip Code 75235	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: BROADBAND SERVICES	
Candidate Name		Transaction ID : SB17.11015 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 148 OF 164			
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SOUTHWEST</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 2702 LOVE FIELD DR			Amount of Each Disbursement this Period 195.10
City DALLAS	State TX	Zip Code 75235	
Purpose of Disbursement CREDIT CARD PAYMENT 3/13: TRAVEL: AIR		Category/ Type	<b>Transaction ID : SB17.11019</b>  <b>[MEMO ITEM]</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. SOUTHWEST</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 2702 LOVE FIELD DR			Amount of Each Disbursement this Period 229.60
City DALLAS	State TX	Zip Code 75235	
Purpose of Disbursement CREDIT CARD PAYMENT 3/13: TRAVEL: AIR		Category/ Type	<b>Transaction ID : SB17.11029</b>  <b>[MEMO ITEM]</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>C. SOUTHWEST</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 2702 LOVE FIELD DR			Amount of Each Disbursement this Period 8.00
City DALLAS	State TX	Zip Code 75235	
Purpose of Disbursement CREDIT CARD PAYMENT 3/13: BROADBAND SERVICES		Category/ Type	<b>Transaction ID : SB17.11030</b>  <b>[MEMO ITEM]</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**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 149 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SOUTHWEST</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 2702 LOVE FIELD DR		Amount of Each Disbursement this Period 8.00
City DALLAS State TX Zip Code 75235	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: BROADBAND SERVICES	
Candidate Name		Transaction ID : SB17.11031 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SOUTHWEST</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 2702 LOVE FIELD DR		Amount of Each Disbursement this Period 205.10
City DALLAS State TX Zip Code 75235	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: TRAVEL: AIR	
Candidate Name		Transaction ID : SB17.11052 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SOUTHWEST</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 2702 LOVE FIELD DR		Amount of Each Disbursement this Period 205.10
City DALLAS State TX Zip Code 75235	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: TRAVEL: AIR	
Candidate Name		Transaction ID : SB17.11053 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 150 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SOUTHWEST</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 2702 LOVE FIELD DR		Amount of Each Disbursement this Period 8.00
City DALLAS State TX Zip Code 75235	Purpose of Disbursement CREDIT CARD PAYMENT 3/13: BROADBAND SERVICES	
Candidate Name		Transaction ID : SB17.11071 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. STRIPES</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 805 N CROCKETT AVE		Amount of Each Disbursement this Period 21.28
City SONORA State TX Zip Code 76950	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: MEETING EXPENSES: MEALS	
Candidate Name		Transaction ID : SB17.10925 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. STRIPES</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 805 N CROCKETT AVE		Amount of Each Disbursement this Period 37.19
City SONORA State TX Zip Code 76950	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: MEETING EXPENSES: MEALS	
Candidate Name		Transaction ID : SB17.10928 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 151 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. STRIPES</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 805 N CROCKETT AVE		Amount of Each Disbursement this Period 44.67
City SONORA	State TX	
Zip Code 76950	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: MEETING EXPENSES: MEALS	Transaction ID : SB17.10948
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. THE CONGRESSIONAL INSTITUTE</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 1700 DIAGONAL RD #730		Amount of Each Disbursement this Period 738.00
City ALEXANDRIA	State VA	
Zip Code 22314	Purpose of Disbursement MEMBERSHIP FEES	Transaction ID : SB17.10916
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THE LIAISON CAPITOL</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 415 NEW JERSEY AVE NW		Amount of Each Disbursement this Period 202.67
City WASHINGTON	State DC	
Zip Code 20001	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: TRAVEL: LODGING	Transaction ID : SB17.10968
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	738.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 152 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. TIME WARNER CABLE</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address 60 COLUMBUS CIR		Amount of Each Disbursement this Period 182.03
City NEW YORK	State NY Zip Code 10023	
Purpose of Disbursement CREDIT CARD PAYMENT 2/17: BROADBAND SERVICES		Transaction ID : SB17.11003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. TIME WARNER CABLE</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 60 COLUMBUS CIR		Amount of Each Disbursement this Period 295.15
City NEW YORK	State NY Zip Code 10023	
Purpose of Disbursement CREDIT CARD PAYMENT 3/13: BROADBAND SERVICES		Transaction ID : SB17.11073
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. TOWNEPLACE SUITES</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 2033 N VETERANS BLVD		Amount of Each Disbursement this Period 93.79
City EAGLE PASS	State TX Zip Code 78852	
Purpose of Disbursement CREDIT CARD PAYMENT 1/13: TRAVEL: LODGING		Transaction ID : SB17.10950
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	



**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 153 OF 164	
	<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)  
**HURD FOR CONGRESS**

**A. TOWNEPLACE SUITES**

Full Name (Last, First, Middle Initial)  
Mailing Address 2033 N VETERANS BLVD

City EAGLE PASS State TX Zip Code 78852

Purpose of Disbursement  
CREDIT CARD PAYMENT 1/13: TRAVEL: LODGING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 13 / 2015

Amount of Each Disbursement this Period: 93.79

Transaction ID : SB17.10951

[MEMO ITEM]

**B. TOWNEPLACE SUITES**

Full Name (Last, First, Middle Initial)  
Mailing Address 2033 N VETERANS BLVD

City EAGLE PASS State TX Zip Code 78852

Purpose of Disbursement  
CREDIT CARD PAYMENT 1/13: TRAVEL: LODGING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 13 / 2015

Amount of Each Disbursement this Period: 93.79

Transaction ID : SB17.10977

[MEMO ITEM]

**C. TOWNEPLACE SUITES**

Full Name (Last, First, Middle Initial)  
Mailing Address 2033 N VETERANS BLVD

City EAGLE PASS State TX Zip Code 78852

Purpose of Disbursement  
CREDIT CARD PAYMENT 1/13: TRAVEL: LODGING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 13 / 2015

Amount of Each Disbursement this Period: 93.79

Transaction ID : SB17.10978

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... 0.00

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

**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 154 OF 164			
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address 1 POST OFFICE DR		Amount of Each Disbursement this Period 64.00
City SAN ANTONIO	State TX	
Zip Code 78284	Purpose of Disbursement CREDIT CARD PAYMENT 2/17: POSTAGE	Transaction ID : SB17.10991
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VALLEY MART</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 12998 BANDERA RD		Amount of Each Disbursement this Period 52.27
City HELOTES	State TX	
Zip Code 78023	Purpose of Disbursement CREDIT CARD PAYMENT 1/13: TRAVEL: FUEL	Transaction ID : SB17.10963
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WHISKEY CAKE</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address 15900 VIA LA CANTERA STE 21200		Amount of Each Disbursement this Period 20.26
City SAN ANTONIO	State TX	
Zip Code 78256	Purpose of Disbursement CREDIT CARD PAYMENT 2/17: MEETING EXPENSE: MEALS	Transaction ID : SB17.10993
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 155 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. YARD HOUSE</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address 1023 4TH AVE		Amount of Each Disbursement this Period 42.33
City SAN DIEGO	State CA	
Zip Code 92101	Purpose of Disbursement CREDIT CARD PAYMENT 2/17: MEETING EXPENSE: MEALS	Transaction ID : SB17.11002 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. YELLOW CAB</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address 9600 IH 35 N		Amount of Each Disbursement this Period 51.27
City SAN ANTONIO	State TX	
Zip Code 78233	Purpose of Disbursement CREDIT CARD PAYMENT 2/17: TRAVEL: GROUND TRANSPORTATION	Transaction ID : SB17.10987 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. YESWARE</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address 75 KNEELAND ST FLOOR 15		Amount of Each Disbursement this Period 15.00
City BOSTON	State MA	
Zip Code 02111	Purpose of Disbursement CREDIT CARD PAYMENT 2/17: ONLINE SUBSCRIPTIONS	Transaction ID : SB17.11000 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 156 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. YESWARE</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 75 KNEELAND ST FLOOR 15		Amount of Each Disbursement this Period 15.00
City BOSTON	State MA Zip Code 02111	
Purpose of Disbursement CREDIT CARD PAYMENT 3/13: ONLINE SUBSCRIPTIONS		Transaction ID : SB17.11062
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. ZAPIER.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 821 CASTRO ST		Amount of Each Disbursement this Period 15.00
City MOUNTAIN VIEW	State CA Zip Code 94105	
Purpose of Disbursement CREDIT CARD PAYMENT 1/13: ONLINE SUBSCRIPTIONS		Transaction ID : SB17.10921
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. ZAPIER.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address 821 CASTRO ST		Amount of Each Disbursement this Period 15.00
City MOUNTAIN VIEW	State CA Zip Code 94105	
Purpose of Disbursement CREDIT CARD PAYMENT 2/17: ONLINE SUBSCRIPTIONS		Transaction ID : SB17.10981
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 157 OF 164	
	<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)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ZAPIER.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 821 CASTRO ST		Amount of Each Disbursement this Period 15.00
City MOUNTAIN VIEW	State CA Zip Code 94105	
Purpose of Disbursement CREDIT CARD PAYMENT 3/13: ONLINE SUBSCRIPTIONS		Transaction ID : SB17.11012
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		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		
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) <b>C.</b>		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		
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	67486.68

**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 158 OF 164	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WILLIAM HURD</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2015
Mailing Address PO BOX 761029		Amount of Each Disbursement this Period 35200.00 <b>Transaction ID : SB19A.10886</b>
City San Antonio State TX Zip Code 78245	Purpose of Disbursement LOAN REPAYMENT	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 23	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B.</b>		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	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C.</b>		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	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	35200.00
<b>TOTAL</b> This Period (last page this line number only).....	35200.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**HURD FOR CONGRESS**

Transaction ID : **SC/10.4955**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**WILLIAM HURD**

**[PERSONAL FUNDS]**

Election: 2013

Primary  
 General  
 Other (specify) ▼

Mailing Address  
PO BOX 761029

City State ZIP Code  
San Antonio TX 78245

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
50000.00 35200.00 14800.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
09 / 30 / 2013 M M / D D / 12/31/2014 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶ 14800.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : SC/10.4955

Terms of the loan have been modified to a new due date of 12/31/2015.

Form/Schedule:

Transaction ID:



**SCHEDULE C (FEC Form 3)  
LOANS**

NAME OF COMMITTEE (In Full) **HURD FOR CONGRESS** Transaction ID : **SC/10.5582**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **WILLIAM HURD** *[PERSONAL FUNDS]* Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
 PO BOX 761029

City State ZIP Code  
 San Antonio TX 78245

Original Amount of Loan 20000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 20000.00
-------------------------------------	------------------------------------	---

**TERMS**

Date Incurred: M 02 / D 24 / Y 2014  
 Date Due: M / D / Y 12/31/2014  
 Interest Rate: 0.00 % (apr)  
 Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	20000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	34800.00

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : SC/10.5582

Terms of the loan have been modified to a new due date of 12/31/2015.

Form/Schedule:

Transaction ID:

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**HURD FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>DINSMORE &amp; SHOHL LLP</b>	Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address PO BOX 64635	
City State Zip Code CINCINNATI OH 45264	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	<b>Transaction ID : SD10.11087</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="5424.90"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="5424.90"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>EC CONSULTING, LLC</b>	Nature of Debt (Purpose): FUNDRAISING CONSULTING
Mailing Address 526 6TH ST, SE	
City State Zip Code WASHINGTON DC 20036	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	<b>Transaction ID : SD10.11089</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="27426.80"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="27426.80"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>RED CURVE SOLUTIONS</b>	Nature of Debt (Purpose): COMPLIANCE CONSULTING
Mailing Address 500 CUMMINGS CENTER SUITE 4400	
City State Zip Code BEVERLY MA 01915	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	<b>Transaction ID : SD10.11085</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="152.52"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="152.52"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional) ..... ▶	<input style="width:100%;" type="text" value="33004.22"/>
<b>2) TOTALS</b> This Period (last page this line number only) ..... ▶	<input style="width:100%;" type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)..... ▶	<input style="width:100%;" type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input style="width:100%;" type="text"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER:  
(check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**HURD FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**RED PRINT STRATEGY**

Mailing Address 145 E. BECK ST

City State Zip Code  
COLUMBUS OH 43206

Nature of Debt (Purpose):  
MEDIA CONSULTING

Outstanding Balance Beginning This Period **Transaction ID : SD10.11086**

0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

72500.00 0.00 72500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	72500.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	105504.22
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	34800.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	140304.22