



R. JACK BOHNERT EA

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

ENROLLED AGENT, TAX ACCOUNTANT

15 AUG 12 PM 3:42

July 17, 2015

Treadwell Alaska Inc.
528 N Street
Anchorage, AK 99501

Attention: Mead Treadwell

RE: FEC Report Ending 11/24/14
FEC Report Ending 12/31/14

Dear Mr. Treadwell,

I prepared the two FEC reports listed above. The question was put to me earlier this year regarding the negative ending cash balance on the two reports. This situation occurred in each report listed above because there were outstanding refund checks paid to contributors that were reported on an earlier FEC report but the refund checks were not cashed. Later refunds, offsets and a donation from the candidate covered this amount. The account was never overdrawn.

Sincerely,

Robert J Bohnert
Robert J Bohnert

201508120200251470

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

15 AUG 12 PM 3:42

Office Use Only

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

12FE4M5

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

Treadwell Alaska 2014

ADDRESS (number and street)

P.O. Box 200125

Check if different than previously reported. (ACC)

Anchorage

AK

99520

2. **FEC IDENTIFICATION NUMBER** ▼

C00546135

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

AK

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

MM / DD / YYYY

in the State of

AK

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



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

in the State of

AK

5. Covering Period

MM / DD / YYYY
11 / 25 / 2014

through

MM / DD / YYYY
12 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Cheryl Frasca

Signature of Treasurer

Cheryl Frasca

Cheryl Frasca

Date

MM / DD / YYYY
02 / 04 / 2015

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

Office Use Only

FEC FORM 3
(Revised 02/2003)

201508120200231279

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Treadwell Alaska 2014

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)) ...	<input type="text" value=""/>	<input type="text" value="1047275.52"/>
(b) Total Contribution Refunds (from Line 20(d)) ..	<input type="text" value=""/>	<input type="text" value="74550"/>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...	<input type="text" value=""/>	<input type="text" value="972725.52"/>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	<input type="text" value="277"/>	<input type="text" value="1233870.58"/>
(b) Total Offsets to Operating Expenditures (from Line 14)...	<input type="text" value=""/>	<input type="text" value="4041.3"/>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	<input type="text" value="277"/>	<input type="text" value="1229829.28"/>
8. Cash on Hand at Close of Reporting Period (from Line 27)...	<input type="text" value="-1739.27"/>	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ...	<input type="text" value=""/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ...	<input type="text" value="260056.37"/>	

For further information contact:

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

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

201508120200231280

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 13

Write or Type Committee Name

Treadwell Alaska 2014

Report Covering the Period: From: M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 To: M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2014

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)...		884853.96
(ii) Unitemized.....		146519.56
(iii) TOTAL of contributions from individuals .		1031373.52
(b) Political Party Committees...		
(c) Other Political Committees (such as PACs)...		15902
(d) The Candidate.....		
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..		1047275.52
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..		
13. LOANS:		
(a) Made or Guaranteed by the Candidate...		248445.11
(b) All Other Loans...		
(c) TOTAL LOANS (add Lines 13(a) and (b))...		248445.11
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..		4041.3
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	.24	39.01
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...	.24	1299800.94

201508120200231281

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES...

277

1233870.58

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES ..

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed
by the Candidate...

(b) Of All Other Loans

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b))...

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees...

74550

(b) Political Party Committees...

(c) Other Political Committees
(such as PACs) ..

(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c))...

74550

21. OTHER DISBURSEMENTS ..

22. TOTAL DISBURSEMENTS

(add Lines 17, 18, 19(c), 20(d), and 21) ▶

277

1308420.58

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...

-1462.51

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...

.24

25. SUBTOTAL (add Line 23 and Line 24)...

-1462.27

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...

277

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD
(subtract Line 26 from Line 25)...

-1739.27

201508120200231282

**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 5 OF 13

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)
Treadwell Alaska 2014

Full Name (Last, First, Middle Initial) A. Wells Fargo Bank		Date of Disbursement MM / DD / YYYY 12 / 10 / 2014
Mailing Address 301 W Northern Lights Blvd		Amount of Each Disbursement this Period 1.15 Transaction ID : SB17-EX1535
City Anchorage	State AK Zip Code 99503	
Purpose of Disbursement Bank Service Charge	Category/Type 001	Bank Service Charge
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Wells Fargo Bank		Date of Disbursement MM / DD / YYYY 12 / 10 / 2014
Mailing Address 301 W Northern Lights Blvd		Amount of Each Disbursement this Period 58.90 Transaction ID : SB17-EX1536
City Anchorage	State AK Zip Code 99503	
Purpose of Disbursement Bank Service Charge	Category/Type 001	Bank Service Charge
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Wells Fargo Bank		Date of Disbursement MM / DD / YYYY 12 / 08 / 2014
Mailing Address 301 W Northern Lights Blvd		Amount of Each Disbursement this Period 3.00 Transaction ID : SB17-EX1534
City Anchorage	State AK Zip Code 99503	
Purpose of Disbursement Bank Service Charge	Category/Type 001	Bank Service Charge
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	63.05
TOTAL This Period (last page this line number only).....	

201508120200231283

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)
Treadwell Alaska 2014

Full Name (Last, First, Middle Initial) A. Nation Builder		Date of Disbursement MM / DD / YYYY 12 / 09 / 2014	
Mailing Address 448 Hill St. Ste. 200		Amount of Each Disbursement this Period 199.00	
City Los Angeles	State CA	Zip Code 90013	Transaction ID : SB17-EX1537
Purpose of Disbursement Reactivate Software License for Dec 2014		Category/ Type 001	Reactivate Software License for Dec 2014
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY	
Mailing Address		Amount of Each Disbursement this Period	
City	State	Zip Code	
Purpose of Disbursement		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address		Amount of Each Disbursement this Period	
City	State	Zip Code	
Purpose of Disbursement		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	199.00
TOTAL This Period (last page this line number only).....	262.05

201508120200231284

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)
Treadwell Alaska 2014

Transaction ID : SC10-LN1

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Mead Treadwell

Primary
 General
 Other (specify) ▼

Mailing Address
528 N Street

City State ZIP Code
Anchorage AK 99501

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000	.00	50000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 06 / D 30 / Y 2013

M 06 / D 15 / Y 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).....

50000.00

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.

201508120200231285

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) **Treadwell Alaska 2014** Transaction ID : **SC10-LN2**

LOAN SOURCE Full Name (Last, First, Middle Initial) Mead Treadwell	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 528 N Street		
City Anchorage	State AK	ZIP Code 99501

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
83000	.00	83000.00

TERMS	Date Incurred M 03 M D 31 P Y 2014	Date Due M 03 M D 31 P Y 2015	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....	▶ 83000.00
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.

201508120200231286

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)
Treadwell Alaska 2014

Transaction ID : SC10-LN3

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Mead Treadwell

Primary
 General
 Other (specify) ▼

Mailing Address
528 N Street

City State ZIP Code
Anchorage AK 99501

Original Amount of Loan 70000	Cumulative Payment To Date .00	Balance Outstanding at Close of This Period 70000.00
----------------------------------	-----------------------------------	---

TERMS

Date Incurred M 03 / D 31 / Y 2014	Date Due M 03 / D 31 / Y 2015	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)...

70000.00

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.

201508120200231287

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)
Treadwell Alaska 2014

Transaction ID : SC10-LN4

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Mead Treadwell

Primary
 General
 Other (specify) ▼

Mailing Address
528 N Street

City State ZIP Code
Anchorage AK 99501

Original Amount of Loan 7945.11	Cumulative Payment To Date .00	Balance Outstanding at Close of This Period 7945.11
------------------------------------	-----------------------------------	--

TERMS

Date Incurred M 07 / D 11 / Y 2014	Date Due M 07 / D 11 / Y 2015	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)...

7945.11

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.

201508120200231288

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)
Treadwell Alaska 2014

Transaction ID : SC10-LN5

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Mead Treadwell

Primary
 General
 Other (specify) ▼

Mailing Address
528 N Street

City State ZIP Code
Anchorage AK 99501

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
22500	.00	22500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 21 / Y 2014	M 03 / D 21 / Y 2015	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)...

22500.00

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.

201508120200231289

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)
Treadwell Alaska 2014

Transaction ID : SC10-LN6

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Mead Treadwell

Primary
 General
 Other (specify) ▼

Mailing Address
528 N Street

City State ZIP Code
Anchorage AK 99501

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
15000	.00	15000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
01 / 12 / 2014	01 / 12 / 2015	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)...	15000.00
TOTALS This Period (last page in this line only) ..	248445.11

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

201508120200231290

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Treadwell Alaska 2014

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor SCM Associates	Nature of Debt (Purpose): Invoice: Mailer Printing & Postage						
Mailing Address PO Box 254							
<table style="width: 100%; border: none;"> <tr> <td style="width: 30%;">City</td> <td style="width: 30%;">State</td> <td style="width: 40%;">Zip Code</td> </tr> <tr> <td>Dublin</td> <td>NH</td> <td>03444</td> </tr> </table>	City	State	Zip Code	Dublin	NH	03444	
City	State	Zip Code					
Dublin	NH	03444					

Outstanding Balance Beginning This Period 686.74	Transaction ID : SD10-INV280						
<table style="width: 100%; border: none;"> <tr> <td style="width: 30%;">Amount Incurred This Period</td> <td style="width: 30%;">Payment This Period</td> <td style="width: 40%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td>.00</td> <td>.00</td> <td>686.74</td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	.00	.00	686.74	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
.00	.00	686.74					

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor SCM Associates	Nature of Debt (Purpose): Invoice: Mailer Printing & Postage						
Mailing Address PO Box 254							
<table style="width: 100%; border: none;"> <tr> <td style="width: 30%;">City</td> <td style="width: 30%;">State</td> <td style="width: 40%;">Zip Code</td> </tr> <tr> <td>Dublin</td> <td>NH</td> <td>03444</td> </tr> </table>	City	State	Zip Code	Dublin	NH	03444	
City	State	Zip Code					
Dublin	NH	03444					

Outstanding Balance Beginning This Period 6836.92	Transaction ID : SD10-INV558						
<table style="width: 100%; border: none;"> <tr> <td style="width: 30%;">Amount Incurred This Period</td> <td style="width: 30%;">Payment This Period</td> <td style="width: 40%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td>.00</td> <td>.00</td> <td>6836.92</td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	.00	.00	6836.92	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
.00	.00	6836.92					

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mead Treadwell	Nature of Debt (Purpose): Invoice: Travel & Meals						
Mailing Address 528 N Street							
<table style="width: 100%; border: none;"> <tr> <td style="width: 30%;">City</td> <td style="width: 30%;">State</td> <td style="width: 40%;">Zip Code</td> </tr> <tr> <td>Anchorage</td> <td>AK</td> <td>99501</td> </tr> </table>	City	State	Zip Code	Anchorage	AK	99501	
City	State	Zip Code					
Anchorage	AK	99501					

Outstanding Balance Beginning This Period 4087.60	Transaction ID : SD10-INV1013						
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Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
.00	.00	4087.60					

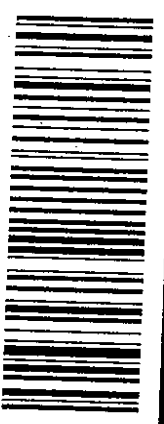
1) SUBTOTALS This Period This Page (optional) ...	11611.26
2) TOTALS This Period (last page this line number) ...	11611.26
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...	248445.11
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	260056.37

201508120200231291

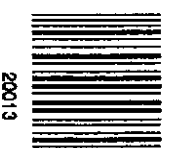
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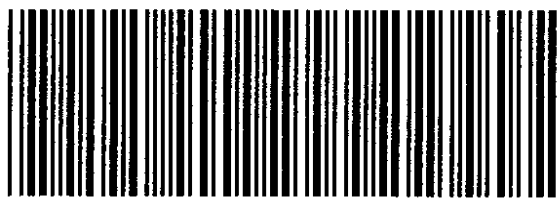
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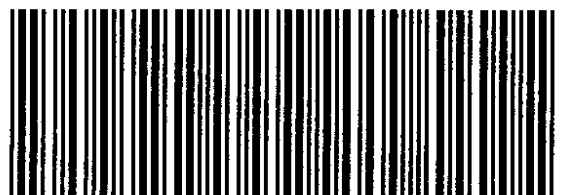
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