

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED
OFFICE OF THE CLERK OF THE SENATE
15 JUN 2014 PM 3:14
Office Use Only

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

12FE4M5

ED GILLESPIE FOR SENATE

ADDRESS (number and street)

PO BOX 71596

Check if different than previously reported. (ACC)

RICHMOND

VA

23255

2. FEC IDENTIFICATION NUMBER ▼

C C00555722

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

VA

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

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

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

Election on MM/DD/YYYY in the State of

5. Covering Period

MM/DD/YYYY through MM/DD/YYYY

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 John G. Selph

Signature of Treasurer

John G. Selph

Date

MM/DD/YYYY

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)

15020051294

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

PAGE 2 / 18

Write or Type Committee Name

ED GILLESPIE FOR SENATE

Report Covering the Period: From:

M M / D D / Y Y Y Y
11 / 25 / 2014

To:

M M / D D / Y Y Y Y
12 / 31 / 2014

**COLUMN A
This Period**

**COLUMN B
Election Cycle-to-Date**

6. Net Contributions (other than loans)

(a) Total Contributions
(other than loans) (from Line 11(e))..

13645.00

6775686.41

(b) Total Contribution Refunds
(from Line 20(d))..

200.00

205.00

(c) Net Contributions (other than loans)
(subtract Line 6(b) from Line 6(a))...

13445.00

6775481.41

7. Net Operating Expenditures

(a) Total Operating Expenditures
(from Line 17) ..

41639.50

7690669.54

(b) Total Offsets to Operating
Expenditures (from Line 14)...

1714.85

838.87

(c) Net Operating Expenditures
(subtract Line 7(b) from Line 7(a))...

39924.65

7689830.67

8. Cash on Hand at Close of
Reporting Period (from Line 27)...

19123.33

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D) ..

0.00

10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule D) ..

990000.00

For further information contact:

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

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

15020051295

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 18

Write or Type Committee Name
ED GILLESPIE FOR SENATE

Report Covering the Period: From:

M	M
11	

 /

D	D
25	

 /

Y	Y	Y	Y	Y	Y
2	0	1	4		

 To:

M	M
12	

 /

D	D
31	

 /

Y	Y	Y	Y	Y	Y
2	0	1	4		

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)...

9050.00

5348409.78

(ii) Unitemized.....

4595.00

680708.10

(iii) TOTAL of contributions
from individuals

13645.00

6029117.88

(b) Political Party Committees...

0.00

50400.00

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

0.00

668440.09

(d) The Candidate

0.00

27728.44

(e) TOTAL CONTRIBUTIONS

(other than loans)
(add Lines 11(a)(ii), (b), (c), and (d))..

13645.00

6775686.41

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES ..

0.00

79858.55

13. LOANS:

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

0.00

990000.00

(b) All Other Loans...

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b))...

0.00

990000.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.) ..

1714.85

838.87

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.05

2543.33

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)...

15359.90

7848927.16

15020051296

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES...	41639.50	7690669.54
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ..	200.00	205.00
(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))...	200.00	205.00
21. OTHER DISBURSEMENTS...	0.00	7431.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	41839.50	7698305.54

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	45602.93
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	15359.90
25. SUBTOTAL (add Line 23 and Line 24)...	60962.83
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	41839.50
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	19123.33

15020051297

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

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

FOR LINE NUMBER: PAGE 5 OF 18
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ED GILLESPIE FOR SENATE

A. Full Name (Last, First, Middle Initial)
Mrs. Nancy G. Campbell

Mailing Address **620 South Stewart Street**

City **Winchester** State **VA** Zip Code **22601**

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

Name of Employer **Homemaker** Occupation **Homemaker**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y
12 / 02 / 2014

Transaction ID : **SA11AI.36059**

Amount of Each Receipt this Period
250.00

Debt Reduction

B. Full Name (Last, First, Middle Initial)
Mr. W. Heywood Frain

Mailing Address **PO Box 29600**

City **Roanoke** State **VA** Zip Code **24018**

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

Name of Employer **Medical Facilities of America,** Occupation **Chairman**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y
12 / 04 / 2014

Transaction ID : **SA11AI.40440**

Amount of Each Receipt this Period
2600.00

Debt reduction

C. Full Name (Last, First, Middle Initial)
Mr. Garland Gray II

Mailing Address **PO Box 82**

City **Waverly** State **VA** Zip Code **23890**

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

Name of Employer **Grayco** Occupation **Supervisor**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y
12 / 30 / 2014

Transaction ID : **SA11AI.40481**

Amount of Each Receipt this Period
500.00

Debt Reduction

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

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

3350.00

15020051298

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 18
(check only one)

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

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NAME OF COMMITTEE (In Full)
ED GILLESPIE FOR SENATE

A. Full Name (Last, First, Middle Initial)
Mrs. Bina S. Shenoy

Mailing Address 10855 Patowmack Drive

City State Zip Code
Great Falls VA 22066

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 30 / 2014

Transaction ID : SA11AI.40486

Amount of Each Receipt this Period
2600.00

Debt Reduction

B. Full Name (Last, First, Middle Initial)
Mr. Sudhakar V. Shenoy

Mailing Address 10855 Patowmack Drive

City State Zip Code
Great Falls VA 22066

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

Name of Employer Occupation
IMC, Inc. Chairman and 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
12 / 30 / 2014

Transaction ID : SA11AI.40484

Amount of Each Receipt this Period
2600.00

Debt Reduction

C. Full Name (Last, First, Middle Initial)
Mr. Brian O. Walsh

Mailing Address 1747 Pennsylvania Ave NW
5th FLR

City State Zip Code
Washington DC 20006

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

Name of Employer Occupation
American Action Network President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 22 / 2014

Transaction ID : SA11AI.40473

Amount of Each Receipt this Period
500.00

Debt Reduction

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

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

5700.00

9050.00

15020051299

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

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

FOR LINE NUMBER: **PAGE 7 OF 18**

(check only one)

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

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NAME OF COMMITTEE (In Full)
ED GILLESPIE FOR SENATE

A. Full Name (Last, First, Middle Initial)
Executive Press Inc.

Mailing Address **10412 Main Street**

City **Fairfax** State **VA** Zip Code **22030**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
1714.85

Date of Receipt
12 / 31 / 2014

Transaction ID : **SA14.40505**

Amount of Each Receipt this Period
1714.85

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 _____

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 _____

Amount of Each Receipt this Period _____

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

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

1714.85

1714.85

15020051300

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

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

FOR LINE NUMBER: PAGE 8 OF 18
(check only one)

17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
ED GILLESPIE FOR SENATE

Full Name (Last, First, Middle Initial)

A. Acquire Digital

Mailing Address 2000 Stokes Lane

City Nashville State TN Zip Code 37215

Purpose of Disbursement Website/social media

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement MM / DD / YYYY 12 / 02 / 2014

Amount of Each Disbursement this Period 2812.50

Transaction ID : SB17.36066

Category/Type 004

Full Name (Last, First, Middle Initial)

B. Chain Bridge Bank

Mailing Address 1445-A Laughlin Ave

City McLean State VA Zip Code 22101

Purpose of Disbursement Monthly account fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement MM / DD / YYYY 12 / 15 / 2014

Amount of Each Disbursement this Period 25.07

Transaction ID : SB17.40472

Category/Type 001

Full Name (Last, First, Middle Initial)

C. Sarah Cochran

Mailing Address 21790 Cypress Valley Terrace

City Sterling State VA Zip Code 20166

Purpose of Disbursement General Campaign Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement MM / DD / YYYY 11 / 25 / 2014

Amount of Each Disbursement this Period 267.00

Transaction ID : SB17.36049

Category/Type 001

SUBTOTAL of Disbursements This Page (optional)..... 3104.57

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

15020051301

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

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

FOR LINE NUMBER: PAGE 9 OF 18
(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
ED GILLESPIE FOR SENATE

A. Facebook

Full Name (Last, First, Middle Initial)

Mailing Address 1601 Willow Rd

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Advertising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY 12/01/2014

Amount of Each Disbursement this Period: 9.78

Transaction ID : SB17.36056

Category/Type

B. First Comp Insurance Company

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 3009

City Omaha State NE Zip Code 68103

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY 12/22/2014

Amount of Each Disbursement this Period: 422.00

Transaction ID : SB17.40477

Category/Type: 001

C. Forest Consulting Services

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1473

City Richmond State VA Zip Code 23218

Purpose of Disbursement Campaign Finance Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY 12/12/2014

Amount of Each Disbursement this Period: 4075.00

Transaction ID : SB17.40463

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 4506.78

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

15020051302

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

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

FOR LINE NUMBER: PAGE 10 OF 18
(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
ED GILLESPIE FOR SENATE

Full Name (Last, First, Middle Initial)
A. Tony Riley

Mailing Address 829 Pacific Avenue

City Portsmouth State VA Zip Code 23707

Purpose of Disbursement
Reimbursement - gas & mileage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
11 / 26 / 2014

Amount of Each Disbursement this Period
426.24

Transaction ID : SB17.36051

Category/ Type
002

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

Mailing Address 140 Second Street

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Credit card processing fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
12 / 31 / 2014

Amount of Each Disbursement this Period
318.27

Transaction ID : SB17.40497

Category/ Type
001

Full Name (Last, First, Middle Initial)
C. United States Treasury

Mailing Address PO Box 660351

City Dallas State TX Zip Code 75266

Purpose of Disbursement
Federal Payroll Tax

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
12 / 15 / 2014

Amount of Each Disbursement this Period
28862.06

Transaction ID : SB17.40471

Category/ Type
001

SUBTOTAL of Disbursements This Page (optional)..... 29606.57

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

15020051303

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

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

FOR LINE NUMBER: PAGE 11 OF 18
(check only one)

17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
ED GILLESPIE FOR SENATE

Full Name (Last, First, Middle Initial)
A. United States Treasury

Mailing Address PO Box 660351

City Dallas State TX Zip Code 75266

Purpose of Disbursement
Income tax payment

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
12 / 30 / 2014

Amount of Each Disbursement this Period
296.80

Transaction ID : SB17.40492

Category/Type
001

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

Mailing Address 55 Glenlake Parkway NE

City Atlanta State GA Zip Code 30328

Purpose of Disbursement
Shipping and delivery

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
11 / 26 / 2014

Amount of Each Disbursement this Period
53.69

Transaction ID : SB17.36052

Category/Type
001

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

Mailing Address 55 Glenlake Parkway NE

City Atlanta State GA Zip Code 30328

Purpose of Disbursement
Shipping & delivery

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
12 / 03 / 2014

Amount of Each Disbursement this Period
17.02

Transaction ID : SB17.40437

Category/Type
001

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

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

367.51

15020051304

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

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

FOR LINE NUMBER: PAGE 12 OF 18
(check only one)

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

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NAME OF COMMITTEE (In Full)
ED GILLESPIE FOR SENATE

A. UPS

Full Name (Last, First, Middle Initial)

Mailing Address 55 Glenlake Parkway NE

City Atlanta State GA Zip Code 30328

Purpose of Disbursement Postage and shipping

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
12 / 04 / 2014

Amount of Each Disbursement this Period: 64.95

Transaction ID : SB17.40439

Category/Type: 001

B. Virginia Department of Taxation

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 27264

City Richmond State VA Zip Code 23261

Purpose of Disbursement State payroll taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
12 / 26 / 2014

Amount of Each Disbursement this Period: 3910.00

Transaction ID : SB17.40488

Category/Type: 001

c. Virginia Department of Taxation

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 27264

City Richmond State VA Zip Code 23261

Purpose of Disbursement Income tax payment

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
12 / 30 / 2014

Amount of Each Disbursement this Period: 54.12

Transaction ID : SB17.40493

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 4029.07

TOTAL This Period (last page this line number only)..... 41614.50

15020051305

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)

Transaction ID : SC/10.11347

ED GILLESPIE FOR SENATE

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

[PERSONAL FUNDS]

Election: 2014

Edward W. Gillespie

Primary

Mailing Address
915 Prince Street

General

Other (specify) ▼
Convention

City State ZIP Code
Alexandria VA 22314

Original Amount of Loan 30000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 30000.00
-------------------------------------	------------------------------------	---

TERMS

Date Incurred: M 05 / D 18 / Y 2014
Date Due: M M / D 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: []

SUBTOTALS This Period This Page (optional)... ▶ 30000.00

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

15020051306

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) **ED GILLESPIE FOR SENATE** Transaction ID : **SC/10.29829**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2014
Edward W. Gillespie
Mailing Address: 915 Prince Street
 Primary
 General
 Other (specify) ▼

City: Alexandria State: VA ZIP Code: 22314

Original Amount of Loan: 65000.00 Cumulative Payment To Date: 0.00 Balance Outstanding at Close of This Period: 65000.00

TERMS
Date Incurred: M 09 / D 30 / Y 2014 Date Due: M M / D 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: []

SUBTOTALS This Period This Page (optional)... ▶ 65000.00
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

15020051307

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) **ED GILLESPIE FOR SENATE** Transaction ID : **SC/10.31460**

LOAN SOURCE Full Name (Last, First, Middle Initial)
Edward W. Gillespie

Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
915 Prince Street

City: Alexandria State: VA ZIP Code: 22314

Original Amount of Loan: 435000.00
 Cumulative Payment To Date: 0.00
 Balance Outstanding at Close of This Period: 435000.00

TERMS

Date Incurred: M 10 / D 15 / Y 2014
 Date Due: M M / D 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: []

SUBTOTALS This Period This Page (optional)... ▶ 435000.00

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

15020051308

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) **ED GILLESPIE FOR SENATE** Transaction ID : **SC/10.35427**

LOAN SOURCE Full Name (Last, First, Middle Initial)
Edward W. Gillespie

Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
915 Prince Street

City: Alexandria State: VA ZIP Code: 22314

Original Amount of Loan: 210000.00
 Cumulative Payment To Date: 0.00
 Balance Outstanding at Close of This Period: 210000.00

TERMS

Date Incurred: M 10 / D 28 / Y 2014
 Date Due: M M / D 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: []

SUBTOTALS This Period This Page (optional)... ▶ 210000.00

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

15020051309

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)

Transaction ID : SC/10.35589

ED GILLESPIE FOR SENATE

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

Edward W. Gillespie

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
915 Prince Street

City State ZIP Code
Alexandria VA 22314

Original Amount of Loan 150000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 150000.00
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TERMS

Date Incurred: M 10 / D 31 / 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: []

SUBTOTALS This Period This Page (optional)...

150000.00

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

15020051310

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)

Transaction ID : SC/10.35648

ED GILLESPIE FOR SENATE

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

[PERSONAL FUNDS]

Election: 2014

Edward W. Gillespie

Primary
 General
 Other (specify) ▼

Mailing Address
915 Prince Street

City State ZIP Code
Alexandria VA 22314

Original Amount of Loan: 100000.00
Cumulative Payment To Date: 0.00
Balance Outstanding at Close of This Period: 100000.00

TERMS

Date Incurred: M 11 / D 01 / Y 2014
Date Due: M M / D 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: []

SUBTOTALS This Period This Page (optional)... ▶ 100000.00
TOTALS This Period (last page in this line only) .. ▶ 990000.00

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

15020051311

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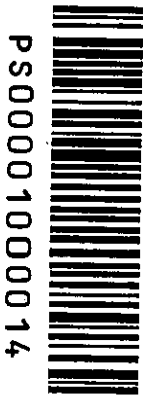


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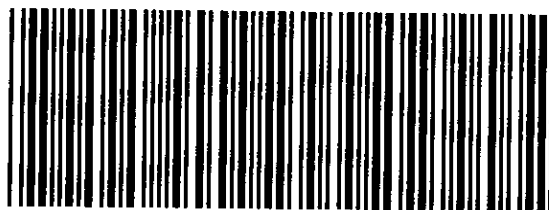
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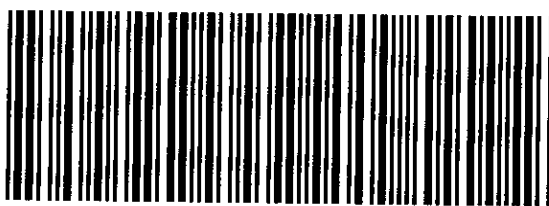
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