



FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

FILED SENATE

14 DEC -4 PM 5:18

Office Use Only

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

12FE4M5

FRIENDS FOR AN AMERICAN MAJORITY

ADDRESS (number and street)

228 S WASHINGTON ST STE 115

Check if different than previously reported. (ACC)

ALEXANDRIA

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

C C00553016

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

MT

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

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

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

Election on 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
10 / 16 / 2014

through

MM / DD / YYYY
11 / 24 / 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 Lisa Lisker

Signature of Treasurer

Lisa Lisker

Date

MM / DD / YYYY
11 / 29 / 2014

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)

14021332362

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

PAGE 2 / 14

Write or Type Committee Name

FRIENDS FOR AN AMERICAN MAJORITY

Report Covering the Period: From:

M M / D D / Y Y Y Y
10 / 16 / 2014

To:

M M / D D / Y Y Y Y
11 / 24 / 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)) ..	7800.00	1412080.00
(b) Total Contribution Refunds (from Line 20(d)) ..	39000.00	38900.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...	-31200.00	1373180.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	71.64	99343.40
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	71.64	99343.40
8. Cash on Hand at Close of Reporting Period (from Line 27)...	5919.37	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ..	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ..	0.00	

For further information contact:

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

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

14021332363

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

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- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

FRIENDS FOR AN AMERICAN MAJORITY

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

I. RECEIPTS

COLUMN A
Total this Period

COLUMN B
Election Cycle Total as of

COLUMN C
Total for

/ /
(date of general election)

/ /
(date after general election)

through

/ /
(last day of reporting period)

11. CONTRIBUTIONS

(other than loans) FROM:

- (a) Individuals/Persons Other than Political Committees
 - (i) Itemized (use Schedule A)

(ii) Unitemized

(iii) Total of contributions from individuals

(b) Political Party Committees

(c) Other Political Committees

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POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
7800.00	1412080.00	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
2600.00	0.00	2600.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
10400.00	1412080.00	2600.00

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POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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Write or Type Committee Name

FRIENDS FOR AN AMERICAN MAJORITY

Report Covering the Period: From: / / 2014 To: / / 2014

II. DISBURSEMENTS

	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES	<input type="text" value="71.64"/>	<input type="text" value="99343.40"/>	<input type="text" value="51.50"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	<input type="text" value="8099.99"/>	<input type="text" value="1267865.73"/>	<input type="text" value="0.00"/>
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Of All Other Loans	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	<input type="text" value="39000.00"/>	<input type="text" value="38900.00"/>	<input type="text" value="2600.00"/>
(b) Political Party Committees	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

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POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(c) Other Political Committees (such as PACs)		
0.00	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))		
39000.00	38900.00	2600.00
21. OTHER DISBURSEMENTS		
0.00	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)		
47171.63	1406109.13	2651.50

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

-31200.00	1373180.00	-2600.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

71.64	99343.40	51.50
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	42691.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)...	10400.00
25. SUBTOTAL (add Line 23 and Line 24)...	53091.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	47171.63
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	5919.37

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

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

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

A. Full Name (Last, First, Middle Initial) Eileen Weiser			Date of Receipt MM / DD / YYYY 10 / 20 / 2014
Mailing Address PO Box 8649			Transaction ID : SA11AI.4495
City Ann Arbor	State MI	Zip Code 48107	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 5200.00
Name of Employer N/A	Occupation Homemaker		Election Cycle-to-Date 5200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

B. Full Name (Last, First, Middle Initial) Ronald Weiser			Date of Receipt MM / DD / YYYY 10 / 20 / 2014
Mailing Address 320 Main St. Ste. 200			Transaction ID : SA11AI.4497
City Ann Arbor	State MI	Zip Code 48104	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 2600.00
Name of Employer McKinley Assoc. Inc.	Occupation CEO		Election Cycle-to-Date 2600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

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

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

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

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

A. Full Name (Last, First, Middle Initial)
SULLIVAN FOR US SENATE

Mailing Address 3705 ARCTIC BOULEVARD #447

City Anchorage State AK Zip Code 99503

FEC ID number of contributing federal political committee. **C** C00551093

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
MM / DD / YYYY
11 / 14 / 2014

Transaction ID : SA12.4499

Amount of Each Receipt this Period
2600.00

Transfer from authorized cmte

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
MM / DD / YYYY

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

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

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

2600.00

2600.00

14021332369

**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

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

Full Name (Last, First, Middle Initial) A. Amex-Merchant		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address PO Box 53853		Amount of Each Disbursement this Period 4.95 Transaction ID : SB17.4503
City Phoenix	State AZ	
Purpose of Disbursement Merchant Fees	Zip Code 85072	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) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement	Zip Code	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	
Purpose of Disbursement	Zip Code	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).....	4.95
TOTAL This Period (last page this line number only).....	4.95

14021332370

**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 10 OF 14
	<input type="checkbox"/> 17 <input type="checkbox"/> 20a <input checked="" type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

Full Name (Last, First, Middle Initial) A. COTTON FOR SENATE INC		Date of Disbursement MM / DD / YYYY 10 / 28 / 2014
Mailing Address PO BOX 379		Amount of Each Disbursement this Period 2672.74 Transaction ID : SB18.4512
City DARDANELLE	State AR	
Zip Code 72834	Purpose of Disbursement Distribution of net JFC Proceeds	Category/ Type 008
Candidate Name THOMAS COTTON	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: AR District: 00	

Full Name (Last, First, Middle Initial) B. STEVE DAINES FOR MONTANA		Date of Disbursement MM / DD / YYYY 10 / 28 / 2014
Mailing Address PO BOX 1598		Amount of Each Disbursement this Period 665.56 Transaction ID : SB18.4513
City HELENA	State MT	
Zip Code 59624	Purpose of Disbursement Distribution of net JFC Proceeds	Category/ Type 008
Candidate Name STEVEN DAINES	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MT District: 00	

Full Name (Last, First, Middle Initial) C. SULLIVAN FOR US SENATE		Date of Disbursement MM / DD / YYYY 10 / 28 / 2014
Mailing Address 3705 ARCTIC BOULEVARD #447		Amount of Each Disbursement this Period 4664.00 Transaction ID : SB18.4514
City ANCHORAGE	State AK	
Zip Code 99503	Purpose of Disbursement Distribution of net JFC Proceeds	Category/ Type 008
Candidate Name DAN SULLIVAN	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: AK District: 00	

SUBTOTAL of Disbursements This Page (optional).....	8002.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 14
	<input type="checkbox"/> 17 20a <input checked="" type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 20d	

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

Full Name (Last, First, Middle Initial) A. THOM TILLIS COMMITTEE		Date of Disbursement MM / DD / YYYY 10 / 28 / 2014
Mailing Address PO BOX 2489		Amount of Each Disbursement this Period 97.69 Transaction ID : SB18.4515
City CORNELIUS	State NC	
Purpose of Disbursement Distribution of net JFC Proceeds	Zip Code 28031	
Candidate Name THOM R TILLIS	Category/ Type 008	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC	District: 00	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement	Zip Code	
Candidate Name	Category/ Type	
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	
Purpose of Disbursement	Zip Code	
Candidate Name	Category/ Type	
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)	97.69
TOTAL This Period (last page this line number only)	8099.99

14021332372

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Howard D. Crow		Date of Disbursement MM / DD / YYYY 10 / 28 / 2014
Mailing Address 3819 Maple Ave.		Amount of Each Disbursement this Period 5200.00 Transaction ID : SB20A.4510
City Dallas	State TX	
Zip Code 75219	Purpose of Disbursement Refund	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) B. Katherine Raymond Crow		Date of Disbursement MM / DD / YYYY 10 / 28 / 2014
Mailing Address 4700 Preston Rd.		Amount of Each Disbursement this Period 5200.00 Transaction ID : SB20A.4511
City Dallas	State TX	
Zip Code 75205	Purpose of Disbursement Refund	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. Seth Klarman		Date of Disbursement MM / DD / YYYY 10 / 28 / 2014
Mailing Address 329 Heath St.		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB20A.4506
City Chestnut Hill	State MA	
Zip Code 02467	Purpose of Disbursement Refund	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).....	13000.00
TOTAL This Period (last page this line number only).....	

14021332573

**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 13 OF 14			
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21	

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

Full Name (Last, First, Middle Initial) A. Michael J. Leffell			Date of Disbursement MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 35 Sheldrake Rd.			Amount of Each Disbursement this Period 2600.00	
City Scarsdale	State NY	Zip Code 10582	Transaction ID : SB20A.4507	
Purpose of Disbursement Refund		Category/Type		
Candidate Name		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. Daniel Loeb			Date of Disbursement MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 15 Central Park West PH39			Amount of Each Disbursement this Period 5200.00	
City New York	State NY	Zip Code 10023	Transaction ID : SB20A.4508	
Purpose of Disbursement Refund		Category/Type		
Candidate Name		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) C. Tea Nadezda Z. Pollock			Date of Disbursement MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 111 W. 67th St.			Amount of Each Disbursement this Period 10400.00	
City New York	State NY	Zip Code 10023	Transaction ID : SB20A.4504	
Purpose of Disbursement Refund		Category/Type		
Candidate Name		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)		

SUBTOTAL of Disbursements This Page (optional).....	18200.00
TOTAL This Period (last page this line number only).....	

14021332374

**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 14 OF 14

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

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

Full Name (Last, First, Middle Initial) A. Allen I. Questrom		Date of Disbursement MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 16A Turtle Creek Bend		Amount of Each Disbursement this Period 2600.00	
City Dallas	State TX	Zip Code 75204	Transaction ID : SB20A.4505
Purpose of Disbursement Refund		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) B. Julian H. Robertson Jr.		Date of Disbursement MM / DD / YYYY 11 / 24 / 2014	
Mailing Address 150 Central Park South 27th Fl.		Amount of Each Disbursement this Period 2600.00	
City New York	State NY	Zip Code 10019	Transaction ID : SB20A.4500
Purpose of Disbursement Refund		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. Charles R. Schwab		Date of Disbursement MM / DD / YYYY 10 / 28 / 2014	
Mailing Address PO Box 192861		Amount of Each Disbursement this Period 2600.00	
City San Francisco	State CA	Zip Code 94119	Transaction ID : SB20A.4509
Purpose of Disbursement Refund		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).....

7800.00

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

39000.00

14021332375

NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 12/4/19
Date of Receipt

USPS FIRST CLASS MAIL _____
Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

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

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

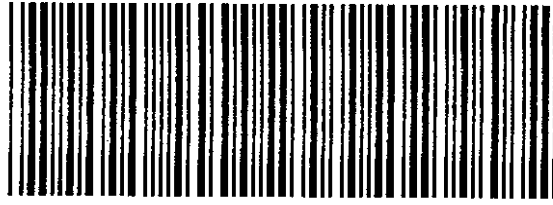
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

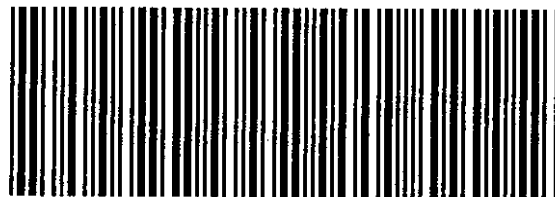
OTHER _____
Date of Receipt or Postmark

PREPARER MN DATE PREPARED 12/4/19

14021332376



SEN PATCH



SEN PATCH

14021332377