

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED

14 OCT 23 AM 10:50  
Office Use Only

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

12FE4M5

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 CITY STATE ZIP CODE STATE DISTRICT

C00546135

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 11 / 4 / 2014 in the State of AK

- (c) 30-Day POST-Election Report for the:
- General (30G)  Runoff (30R)  Special (30S)
- Election on / / in the State of

5. Covering Period 10 / 01 / 2014 through 10 / 15 / 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 Date 10 / 20 / 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								
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14021142401

**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
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ...	100	1047275.52
(b) Total Contribution Refunds (from Line 20(d)) ..		74550
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...	100	972725.52
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) ..	7908.86	1231732.73
(b) Total Offsets to Operating Expenditures (from Line 14)...		4041.3
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	7908.86	1227691.43
<b>8. Cash on Hand at Close of Reporting Period (from Line 27)...</b>	397.73	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ..</b>		
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ..</b>	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

14021142402

**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
10	

 / 

D	D
01	

 / 

Y	Y	Y	Y
2014			

 To: 

M	M
10	

 / 

D	D
15	

 / 

Y	Y	Y	Y
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.....

100
-----

146519.56
-----------

(iii) TOTAL of contributions from individuals .

100
-----

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))..

100
-----

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.).....

--

38.16
-------

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)...

100
-----

1299800.09
------------

14021192403

**DETAILED SUMMARY PAGE**  
of Disbursements

**II. DISBURSEMENTS**

**COLUMN A**  
Total This Period

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

17. OPERATING EXPENDITURES...

7908.86

1231732.73

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 ...

(b) Political Party Committees...

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

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

21. OTHER DISBURSEMENTS ...

22. TOTAL DISBURSEMENTS

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

7908.86

1306282.73

**III. CASH SUMMARY**

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

8206.59

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

100

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

8306.59

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

7908.86

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

397.73

14021192404

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

Mailing Address 301 W Northern Lights Blvd

City Anchorage State AK Zip Code 99503

Purpose of Disbursement  
Bank Service Charge

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

227.69
--------

Transaction ID : SB17-EX1523

Bank Service Charge

**B. Wells Fargo Bank**

Mailing Address 301 W Northern Lights Blvd

City Anchorage State AK Zip Code 99503

Purpose of Disbursement  
Bank Service Charge

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

121.22
--------

Transaction ID : SB17-EX1524

Bank Service Charge

**c. Carlyle LLC**

Mailing Address PO Box 242283

City Anchorage State AK Zip Code 99524

Purpose of Disbursement  
Closeout of Lease Agreement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 09 / 2014

Amount of Each Disbursement this Period

7500.00
---------

Transaction ID : SB17-EX1522

Closeout of Lease Agreement

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

7848.91
---------

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

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14021142405

**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
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)  
**Treadwell Alaska 2014**

**A. Vesta AT&T**

Full Name (Last, First, Middle Initial)

Mailing Address 4711 Business Park Blvd

City Anchorage State AK Zip Code 99503

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement: MM / DD / YYYY  
10 / 02 / 2014

Amount of Each Disbursement this Period: 45.00

Transaction ID : SB17-EX1518

Administrative/Salary/Overhead Expenses

Category/Type: 001

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY

Amount of Each Disbursement this Period:

Category/Type:

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY

Amount of Each Disbursement this Period:

Category/Type:

**SUBTOTAL** of Disbursements This Page (optional)..... 45.00

**TOTAL** This Period (last page this line number only)..... 7893.91

19021142406

**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 50000	Cumulative Payment To Date .00	Balance Outstanding at Close of This Period 50000.00
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**TERMS**

Date Incurred: M 08 / D 30 / Y 2013  
Date Due: M 06 / D 15 / Y 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)... ▶ 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.

14021142407

**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)

[PERSONAL FUNDS]

Election: 2014

**Mead Treadwell**

Primary

Mailing Address  
528 N Street

General

Other (specify) ▼

City State ZIP Code  
Anchorage AK 99501

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

Date Incurred: M 03 / D 31 / Y 2014  
Date Due: M 03 / D 31 / Y 2015  
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)...

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.

14021142408



**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

Mailing Address  
528 N Street

General

Other (specify) ▼

City State ZIP Code  
Anchorage AK 99501

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

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 31 / Y 2014	M 03 / D 31 / 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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

**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.

14021142409

**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
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**TERMS**

Date Incurred: 07 / 11 / 2014 Date Due: 07 / 11 / 2015 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)...

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.

14021142410

**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 22500	Cumulative Payment To Date .00	Balance Outstanding at Close of This Period 22500.00
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**TERMS**

Date Incurred: M 03 / D 21 / Y 2014  
Date Due: M 03 / D 21 / Y 2015  
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)...

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.

14021142411

**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

Mailing Address  
528 N Street

General

Other (specify) ▼

City State ZIP Code  
Anchorage AK 99501

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

Date Incurred M 01 / D 12 / Y 2014	Date Due M 01 / D 12 / 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)...

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.

14021142412

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 13 OF 13
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Treadwell Alaska 2014**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>SCM Associates</b>	Nature of Debt (Purpose): Invoice: Mailer Printing & Postage
Mailing Address <b>PO Box 254</b>	
City <b>Dublin</b> State <b>NH</b> Zip Code <b>03444</b>	

Outstanding Balance Beginning This Period <b>686.74</b>	Transaction ID : <b>SD10-INV280</b>	
Amount Incurred This Period <b>.00</b>	Payment This Period <b>.00</b>	Outstanding Balance at Close of This Period <b>686.74</b>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>SCM Associates</b>	Nature of Debt (Purpose): Invoice: Mailer Printing & Postage
Mailing Address <b>PO Box 254</b>	
City <b>Dublin</b> State <b>NH</b> Zip Code <b>03444</b>	

Outstanding Balance Beginning This Period <b>6836.92</b>	Transaction ID : <b>SD10-INV558</b>	
Amount Incurred This Period <b>.00</b>	Payment This Period <b>.00</b>	Outstanding Balance at Close of This Period <b>6836.92</b>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mead Treadwell</b>	Nature of Debt (Purpose): Invoice: Travel & Meals
Mailing Address <b>528 N Street</b>	
City <b>Anchorage</b> State <b>AK</b> Zip Code <b>99501</b>	

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

1) <b>SUBTOTALS</b> This Period This Page (optional) ...	<b>11611.28</b>
2) <b>TOTALS</b> This Period (last page this line number only) ...	<b>11611.28</b>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)...	<b>248445.11</b>
4) <b>ADD 2) and 3) and carry forward to appropriate line of Summary Page</b> (last page only)	<b>260056.37</b>

14021142413



**FedEx** *NEW Package*  
Express *US Airbill*

Tracking Number **8064 4934 6930**

**Extremely Important**

Form ID No. **0200**

Recipient's ZIP

**4 Express Package Service** \*To avoid handling, note: Service order has changed. Please select carefully.

Packages up to 150 lbs. For packages over 25 lbs., see the new FedEx Express Package 3D Airbill.

**Next Business Day**

- FedEx First Overnight™ (delivery to select locations. Future shipments will be subject to capacity. Subject to Saturday Delivery if selected.)
- FedEx Priority Overnight™ (next business morning. \*Friday shipments will be subject to capacity. Subject to Saturday Delivery if selected.)
- FedEx Standard Overnight™ (next business afternoon. \*Saturday Delivery NOT available.)

**2 or 3 Business Days**

- FedEx 2Day A.M.™ (Saturday Delivery NOT available.)
- FedEx 2Day (second business morning. \*Third day shipments will be subject to capacity. Subject to Saturday Delivery if selected.)
- FedEx Express Saver™ (Saturday Delivery NOT available.)

**5 Packaging** \*Declared value limit \$500.

- FedEx Envelope\*  FedEx Pak\*  Other

**6 Special Handling and Delivery Signatures** **09/21/2014**

- SATURDAY Delivery (not available for FedEx Standard Overnight, FedEx 2Day A.M. or FedEx Express Saver.)
- No Signature Required (Package may be left without signature. Signature required for delivery. For special handling or signature, see back.)
- Direct Signature (Signature required. Signature required for delivery. For special handling or signature, see back.)
- Indirect Signature (Signature required. Signature required for delivery. For special handling or signature, see back.)

Does this shipment contain dangerous goods?

- No  Yes (Dangerous goods including dry ice cannot be shipped in FedEx packaging or containers in FedEx Express time slots.)

**7 Payment Bill to:**

- Sender's account  Recipient  Third Party  Credit Card  Cash/Check
- Ocean recip.  Airtel No.

fedex.com 1.800.GoFedEx 1.800.463.3339

**1 From**

Date **10/1/14**

Sender's Name **Wynn's Family** Phone **907 551 2250**

Company **Teledyne Avionics Corporation**

Address **PO Box 20025**

City **Aviation** State **AK** ZIP **99517**

**2 Your Internal Billing Reference**

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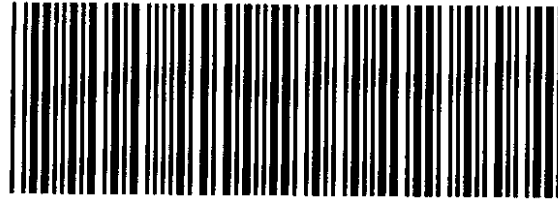
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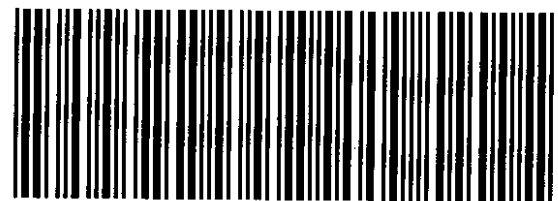
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