Image# 14952797421 PAGE 1 / 15

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

						Office Use	Only
NAME OF T COMMITTEE (in full)	YPE OR PRINT ▼		ample: If typirer the lines.	ng, type	12FE4M5		
Kelly PAC							1
ADDRESS (number and street)	901 N Washingtor	Street					
Check if different	Suite 700						
than previously reported. (ACC)	Alexandria				VA L	22314-1	535
2. FEC IDENTIFICATION NUM	MBER ▼	CITY		5	STATE 🛦	ZI	P CODE A
C C00493411		3. IS THIS REPORT		NEW N) OR	AN (A	MENDED	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2)		May 20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On:	Mar 20 (M3)		Jun 20 (M6)		20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15	,	Apr 20 (M4)	,	Jul 20 (M7)	Oct	20 (M10)	Jan 31 (YE)
Quarterly Report (Q1 July 15	(c) 12-Day	notion	Primary (12F	')	General	(12G)	Runoff (12R)
Quarterly Report (Q2	Report		Convention (12C)	Special (12S)	
October 15 Quarterly Report (Q3	3)						
January 31 Year-End Report (YE	E)	Election on	M M /	D D /	Y		the state of
July 31 Mid-Year Report (Non-election Year Only) (MY)	POST-E		General (300	ā)	Runoff (3	30R)	Special (30S)
Termination Report	Report	for the:	M M /	D D /	Y . Y . Y . Y	ir	n the
(TER)		Election on	11	04	2014		tate of NH
5. Covering Period 10	/ D D / Y	2014	through	M M M	24	2014	W Y
I certify that I have examined this	Report and to the	e best of my kno	wledge and I	pelief it is tru	e, correct an	d complete.	
Type or Print Name of Treasurer	Theodore V. Koch	า					
Signature of Treasurer Theodo	ore V. Koch		[Electronically	Filed] D	ate 12	/ D D D 04	/ Y Y Y Y Y 2014
NOTE: Submission of false, erroned	ous, or incomplete i	information mav s	ubject the pers	son signing th	is Report to t	ne penalties	of 2 U.S.C. §437a.
Office	, 11		, , ,	<u> </u>		_ ·	FORM 3X
Use Only							. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Kelly PAC 10 16 2014 24 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 118411.3 January 1, 2014 (b) Cash on Hand at 97324.66 Beginning of Reporting Period..... 311916.79 22500 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 119824.66 430328.09 6(a) and 6(c) for Column B)..... 54740.14 365243.57 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 65084.52 65084.52 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 3750 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530

Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Ke	lΙν	PA	C

Report Covering the Period: From: 10	16 2014	To: 11 24 2014
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Total Tills Period	Calendar fear-to-Date
. Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	0	15500
(i) iterilized (use schedule A)		7 7
(ii) Unitemized	0	12
(iii) TOTAL (add		7 7
Lines 11(a)(i) and (ii)▶	0	15512
Lines IT(a)(i) and (ii)		
(b) Political Party Committees	0	2404.79
(c) Other Political Committees		
(such as PACs)	22500	294000
(d) Total Contributions (add Lines	7	
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	22500	311916.79
2. Transfers From Affiliated/Other	7 7	7
Party Committees	0	0
rary committees		
8. All Loans Received	0	0
. All Estatis Floorived		
L. L B L. B i . l	0	
L. Loan Repayments Received	, , , , ,	0
5. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)	0	0
(Carry Totals to Line 37, page 5)		
6. Refunds of Contributions Made		
to Federal Candidates and Other	0	0
Political Committees		
Other Federal Receipts		0
(Dividends, Interest, etc.)	0	0
Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account	0	
(from Schedule H3)		0
(b) Levin Funds (from Schedule H5)	0	C
(c) Total Transfers (add 18(a) and 18(b))	0	0
. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	22500	311916.79
_		
Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	22500	311916.79

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B			
. Operating Expenditures:	Iotal Tills Period	Calendar Year-to-Date			
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)					
(i) Federal Share	0	0			
(i) Todoral Oliaro					
(ii) Non-Federal Share	0	0			
(b) Other Federal Operating					
Expenditures	34490.14	150293.57			
(c) Total Operating Expenditures					
(add 21(a)(i), (a)(ii), and (b))▶	34490.14	150293.57			
Transfers to Affiliated/Other Party	0	0			
CommitteesContributions to	0				
Federal Candidates/Committees and Other Political Committees	20000	182500			
Independent Expenditures		102000			
(use Schedule E)	0	0			
Coordinated Party Expenditures	7	7			
(2 U.S.C. §441a(d)) (use Schedule F)	0	0			
•					
Loan Repayments Made	0	0			
Loans MadeRefunds of Contributions To:	0	0			
(a) Individuals/Persons Other					
Than Political Committees	0	0			
(1) P. P. P. J. C		0			
(b) Political Party Committees(c) Other Political Committees	0				
(c) Other Political Committees (such as PACs)	0	0			
(3001 03 1703)		7			
(d) Total Contribution Refunds					
(add Lines 28(a), (b), and (c))▶	0	0			
Other Disbursements	250	32450			
ı					
Federal Election Activity (2 U.S.C. §431(20))					
(a) Allocated Federal Election Activity					
(from Schedule H6)	0	0			
(i) Federal Share	<i>y</i>				
(ii) "Levin" Share	0	0			
(b) Federal Election Activity Paid Entirely					
With Federal Funds	0	0			
(c) Total Federal Election Activity (add					
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0	0			
, , , ,					
Total Disbursements (add Lines 21(c), 22,					
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	54740.14	365243.57			
Total Federal Disbursements					
(subtract Line 21(a)(ii) and Line 30(a)(ii)	51710.11	205040 57			
from Line 31)	54740.14	365243.57			

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	22500	311916.79
4. Total Contribution Refunds (from Line 28(d))	0	0
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	22500	311916.79
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	34490.14	150293.57
7. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
Net Operating Expenditures (subtract Line 37 from Line 36)	34490.14	150293.57

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 OF 15 (check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(sheat only one) 11a 11b X 11c 12 13 14 15 16 11								
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) Kelly PAC											
Full Name (Last, First, Middle Initial) A. American Dental Association PAC			Date of Receipt								
Mailing Address 1111 14th Street NW Suite 1100			11 06 2014								
City Washington	State DC	Zip Code 20005-5627	Transaction ID : 948-1172-c Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C co	0000729	2000								
Name of Employer	Occupation	1	Contribution								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000]								
Full Name (Last, First, Middle Initial) B. American Hospital Association PA	C		Date of Receipt								
Mailing Address 325 7th Street NW Suite 700	Suite 700										
City Washington	State DC	Zip Code 20004-2801	Transaction ID : 753-1170-c Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C co	0106146	2000								
Name of Employer	Occupation	1	Contribution								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000]								
Full Name (Last, First, Middle Initial) C. American Society of Anesthesion	logists PAC	;	Date of Receipt								
Mailing Address 520 N Northwest Highway			10 24 _ 2014 _								
City Park Ridge	State IL	Zip Code 60068-2538	Transaction ID : 272-1163-c Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C co	0255752	5000								
Name of Employer	Occupation	1	Contribution								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000]								
SUBTOTAL of Receipts This Page (optional)			9000.00								

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

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 (check only one)			7 (OF 15				
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b X 11c 12 13 14 15 16								
	ny information copied from such Reports and S for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full) Kelly PAC											
Α.		soc. PAC			Date of	Receip	t					
	Mailing Address 1310 G Street NW				11		03	Y	2014	Y		
	City Washington	State DC	Zip Code 20005-3000				D : 279- h Receip			Pariod		
	FEC ID number of contributing federal political committee.	C co	0194746		Amount	. OI Eac	i necei	n uns	_	2000		
	Name of Employer	Occupation	1		Contribu	tion						
	Receipt For: Primary General	Aggregate	Year-to-Date ▼									
	Other (specify) ▼	L	5000									
В.	Full Name (Last, First, Middle Initial) DLA Piper LLP (US) PAC		Date of Receipt									
	Mailing Address 500 8th Street NW			10 24 2014								
	City	State DC	Zip Code 20004-2131	Transaction ID : 439-1164-c								
	Washington FEC ID number of contributing		20004-2131	Amount of Each Receipt this Period								
	federal political committee.	C co	0151340		500							
	Name of Employer	Occupation		Contribution								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼									
	Other (specify) ▼	L	500	Ц								
C.	Full Name (Last, First, Middle Initial) KPMG Partners / Principals & Em	ployees P	AC		Date of	Receip	t					
	Mailing Address 1801 K Street NW				M = M	/ D	24 /	Y	y y y 2014	Y		
	City Washington	State DC	Zip Code 20006-1302				D : 263- h Receip		-с	d		
	FEC ID number of contributing federal political committee.	C co	0280222			- 7			_	8000		
	Name of Employer		Contribu	ition								
	Receipt For: Primary General Other (specify) ▼]										
5	SUBTOTAL of Receipts This Page (optional)			<u> </u>					5500	0.00		
Н	OTAL This Period (last page this line number			-								

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 OF 15 (check only one)						
ITEM	IZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b X 11c 12 13 14 15 16						
				erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
	ME OF COMMITTEE (In Full)									
	Name (Last, First, Middle Initial) crosoft Corporation PAC			Date of Receipt						
	ing Address 16011 NE 36th Way # 97017			10 29 2014						
City Red	dmond	State WA	Zip Code 98052-6301	Transaction ID : 259-1167-c Amount of Each Receipt this Period						
	ID number of contributing eral political committee.	C co	0227546	2500						
Nan	ne of Employer	Occupation	ı	Contribution						
Rec	eipt For: Primary General	Aggregate	Year-to-Date ▼	_						
	Other (specify)		5000							
B . <u>O</u> v	Name (Last, First, Middle Initial) wner-Operator Independent Drive	rs Assn Ind	c. PAC	Date of Receipt						
	ling Address PO Box 1000 1 NW Ooida Dr			10 29 2014						
City	in Valley	State MO	Zip Code 64029-1000	Transaction ID : 382-1168-c						
FEC	C ID number of contributing eral political committee.		0236778	Amount of Each Receipt this Period 3000						
Nan	ne of Employer	Occupation	l	Contribution						
Rec	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3000							
	Name (Last, First, Middle Initial) hited Parcel Service Inc. PAC			Date of Receipt						
Mail	ing Address 55 Glenlake Parkway NE			10 29 2014						
City	anta	State GA	Zip Code 30328-3474	Transaction ID : 348-1169-c Amount of Each Receipt this Period						
	CID number of contributing eral political committee.	C co	0064766	2500						
Nan	ne of Employer	Occupation	Contribution							
Rec	eipt For: Primary General Other (specify)									
SUBT	OTAL of Receipts This Page (optional)			8000.00						
	L This Period (last page this line number		·	22500.00						

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S	CHEDULE B (FEC Form 3X)							PAGE	9	OF 15
ΙT	EMIZED DISBURSEMENTS		category of the	(check only	lly one)			check only one)		
			Summary Page	X 21b 27	22 28a	23 28b	\downarrow	24 28c	25 29	26 30b
Δ	by information conicd from such Deposits and Chater	l conto mass	not be sold or							
	ny information copied from such Reports and Staten for commercial purposes, other than using the nam									
\setminus	NAME OF COMMITTEE (In Full)									
$ \rangle$	Kelly PAC									
\angle	Full Name (Last, First, Middle Initial)			1						
Α.	Koch & Hoos, LLC				Date of	f Disbur	seme	nt		
					M = M	_	■ D		Y Y	Y
	Mailing Address 901 N Washington Street				11	J L	06		2014	
	Suite 700	State	Zip Code							
	Alexandria	VA	22314-1535		Trans	action I	D : S	B21B-50	0-1171	-е
	Purpose of Disbursement									
	PAC Accounting/Compliance Services			001	Amoun	t of Eac	h Dis	burseme	nt this	Period
	Candidate Name			Category/					235	0.13
	Office Sought: House Disbursen	nent For:		Туре		- 7		- 7		
		Primary	General							
	President	Other (spe	cify) 🔻							
	State: District:									
P	Full Name (Last, First, Middle Initial)				Data a	f Disbur	como	nt		
٥.	LVH Consulting				M = M		seme		Y Y	V
	Mailing Address 2119 Paul Spring Road				11	, ,	14		2014	. '
	City S Alexandria	State VA	Zip Code 22307-1803		Trans	saction	ID : S	B21B-36	8-1175	i-e
	Purpose of Disbursement	V.7.	22301-1003							
	PAC Fundraising Consulting			001	Amoun	t of Eac	h Dis	burseme	nt this	Period
	Candidate Name			Category/						200
	Office Sought: House Bisham	nont Fam		Type		7	-	7		200
	Office Sought: House Disbursen Senate	nent For: Primary	General							
		Other (spe								
_	State: District:	`	··· •							
	Full Name (Last, First, Middle Initial)									
C.	Mint Bistro				Date of	f Disbur	seme			
	Mailing Address 1105 Elm Street				M M M	/ D	т _D		y y y 2014	Y
					10		_,		_0 1-7	_
	•	State	Zip Code		Trans	saction	D S	B21B-94	9-1174	-е
	Manchester Purpose of Disbursement	NH	03101-1505		irans		0	J_ 1 D- V4		•
	PAC Food & Beverage	001	Amous	t of Eco	h Dia	burseme	at this	Dariod		
	Candidate Name			Category/	Amoun	ιοι ⊏ac	אט וו	bui semel		
				Type		1			26	3.45
	Office Sought: House Disbursen									
	Senate President	Primary Other (spe	General							
	State: District:	Other (spe	City) 🔻							
Г	District.				_	-				
s	UBTOTAL of Disbursements This Page (optional)								2813	3.58
H	5 (pre-17)				_	,		7	-	—
Т	OTAL This Period (last page this line number only)					- 1		7		

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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 10 OF						
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)					
	Detailed Summary Page	X 21b		23 24 25 26 28b 28c 29 30b				
Any information copied from such Reports and State	mente may not be cold or							
or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full)								
ig Kelly PAC								
Full Name (Last, First, Middle Initial)								
A. The Gula Graham Group			Date of Disl	oursement				
			M = M /	D D / Y Y Y Y Y				
Mailing Address 499 S Capitol Street SW			10	16 2014				
Suite 420 City	State Zip Code							
Washington	DC 20003-4027		Transactio	on ID : SB21B-271-1154-e				
Purpose of Disbursement								
PAC Event/Food & Beverage/Travel/Fax/Email/Sl	nipping	001	Amount of E	Each Disbursement this Period				
Candidate Name		Category/		18521.19				
Office Sought: House Disburs	ement For:	Type						
Senate	Primary General							
President	Other (specify) ▼							
State: District:	_							
Full Name (Last, First, Middle Initial)			Dota of Dist	a.uraamant				
B. The Gula Graham Group			Date of Disl					
Mailing Address 499 S Capitol Street SW			10	23 2014				
Suite 420								
City	State Zip Code		Transaction	on ID : SB21B-271-1158-e				
Washington Purpose of Disbursement	DC 20003-4027							
PAC Fundraising Consulting		001	Amount of E	Each Disbursement this Period				
Candidate Name		Category/		6427 E				
		Type		6437.5				
Office Sought: House Disburs Senate	ement For: Primary General							
President	Other (specify)							
State: District:	- (-P 9)/ V							
Full Name (Last, First, Middle Initial)								
C. The Gula Graham Group			Date of Disl	bursement				
Mailing Address 400 C Canital Street SW			10 /	28 2014				
Mailing Address 499 S Capitol Street SW Suite 420			10	28 2014				
City	State Zip Code		Transaction	on ID : SB21B-271-1162-e				
Washington	DC 20003-4027		Hallbactic	лі ID . 302 ID-27 I-1 I02 -8				
Purpose of Disbursement PAC Fundraising Consulting		001	A	Tank Diskumannung H. D. C.				
Candidate Name			Amount of E	Each Disbursement this Period				
		Category/ Type		2250				
	ement For:							
Senate	Primary General							
State: President State:	Other (specify) ▼							
S.C.I.O.								
SUBTOTAL of Disbursements This Page (optional)				27208.69				
, (april 14)								
TOTAL This Period (last page this line number onl	y)							

To each category of the Detailed Summary Page	SCHEDULE B (FEC Form 3X)	NUMBER:	PAGE 11 OF 15					
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) Kelly PAC Full Name (Last, First, Middle Initial) An The Guia Graham Group Mailing Address 498 Captot Street SW Suite 420 Caty Washington Purpose of Disbursement PAC Eventificod & Beverage/Travel/Fax/Email/Shipping Candidate Name Category/ Type Office Sought: House Bonate Primary General State: Disbursement Category/ Type Office Sought: House Primary General District Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Amount of Each Disbursement this Period Category/ Type Office Sought: House Primary General District Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Office Sought: House President Other (specify) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Primary General Other (specify) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Primary General Other (specify) Washing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House President Other (specify) Washing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House President Other (specify) Washing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House President Other (specify) Amount of Each Disbursement this Period Category/ Type Office Sought: House President Other (specify) Amount of Each Disbursement this Period Category/ Type Office Sought: Hou	ITEMIZED DISBURSEMENTS		X 21b	22 23				
NAME OF COMMITTEE (In Full) Kelly PAC Full Name (Last, First, Middle Initial) The Gula Graham Group Mailing Address 499 S Captol Street SW Suite 420 City State Zip Code Purpose of Dibbursement PAC EventFood & Beverage/Trave/Fax/Email/Shipping Candidate Name City State: District Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ State: District Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Primary General President Other (specify) ▼ Date of Disbursement this Period Category/ Type Amount of Each Disbursement this Period Category/ Type Category/ Type Amount of Each Disbursement this Period Category/ Type Category/ Type Amount of Each Disbursement this Period Category/ Type Category/ Type Category/ Type Amount of Each Disbursement this Period Category/ Type Category/			l by any perso	on for the purpos	e of soliciting contributions			
A The Gula Graham Group Mailing Address 499 S Capitol Street SW Suite 420 City State Zip Code 20003-4027 Purpose of Disbursement PAC EventProof & Beverage/Travel/Fax/Email/Shipping Candidate Name President Disbursement For: Senate Primary General Primary General Prupose of Disbursement Candidate Name Category/ State Zip Code Amount of Each Disbursement this Period Amount of Each Disbursement this Period Category/ Type Date of Disbursement III 11 13 2 2014 Transaction ID : SB21B-271-1173-e Amount of Each Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type Office Sought: House Senate Primary General Primary Genera	NAME OF COMMITTEE (In Full)	e and address of any political	committee to	solicit contribution	ons from such committee.			
Mailing Address 499 S Capitol Street SW Suite 420 City State Zip Code Purpose of Disbursement President State Disbursement President State Disbursement Purpose of Disbursement President State Disbursement Candidate Name Office Sought: House Disbursement For: Senate President Candidate Name Office Sought: House Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) Amount of Each Disbursement this Period Category/ Type Date of Disbursement Candidate Name Office Sought: House Disbursement For: Senate President Other (specify) ▼ Full Name (Last, First, Middle Initial) Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Senate President Other (specify) ▼ Date of Disbursement this Period Category/ Type Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Candidate Name Candidate Name Candidate Name Candidate Name Candidate Name Candidate Name Category/ Type Office Sought: House Disbursement For: Senate President Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Primar	_							
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	for commercial purposes, other than using the name										
\setminus	NAME OF COMMITTEE (In Full) Kelly PAC										
<u>/_</u>	•										
_	Full Name (Last, First, Middle Initial)				5 .						
Α.	Cory Gardner for Senate					Disbursem					
	Mailing Address 9227 E Lincoln Avenue				10	17	/ Y	2014	W Y		
	# 200-234										
		State	Zip Code		Trans	action ID :	SB23-94	5-1156	-e		
	Lone Tree Purpose of Disbursement	СО	80124-5506		Truite		022001	0 1.00	•		
	Contribution			011	Amoun	t of Each D	isbursem	ent this	s Peri	od	
	Candidate Name			Category/				-			
	Cory Gardner			Type					5000		
		nent For:									
		Primary	General								
	State: CO District:	Other (spe	city) 🔻								
	Full Name (Last, First, Middle Initial)										
В.	Kansas Republican Party				Date of	Disbursem	ent				
					М – М	/ D D	/ Y	YY	- Y		
	Mailing Address PO Box 4157				10	28		2014			
	,	State	Zip Code		Trans	action ID :	SB23-94	7-1161	-е		
	Topeka Purpose of Disbursement	KS	66604-0157								
	Contribution			011	Amount of Each Disbursement this Perio						
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	Kansas Republican Party			Type		-,-	7		5000	'	
	Office Sought: House Disbursem										
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	State: District:	Other (spe	city) 🔻								
	Full Name (Last, First, Middle Initial)										
C.	Republican Party of Kentucky				Date of	Disbursem	ent				
					M M	/ D D	/ Y	YY	I Y		
	Mailing Address PO Box 1068				10	17		2014			
	City	State	Zip Code				0000 -	0.44==			
	Frankfort	KY	40602-1068		Trans	action ID :	SB23-94	6-1157	-е		
	Purpose of Disbursement Contribution										
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	Republican Party of Kentucky	Category/ Type					5000	П			
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	President	Other (spe	cify) 🔻								
	State: District:										
s	SUBTOTAL of Disbursements This Page (optional)			·····		-,-		1500	00.00		
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т	OTAL This Period (last page this line number only).					_	_				

SCHEDULE B (FEC Form 3X)	Has somewhat and the Co	FOR LINE	NUMBER:	PAGE 13 OF 15	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27			
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan		d by any perso	on for the purpose of	soliciting contributions	
NAME OF COMMITTEE (In Full) Kelly PAC	no and address of any politica	. committee to	Solicit Contributions II	om suon commutee.	
		ı			
Full Name (Last, First, Middle Initial) A. Thom Tillis Committee			Date of Disburseme	ent	
Mailing Address PO Box 97396			10 28 2014		
Raleigh	State Zip Code NC 27624-7396		Transaction ID:	SB23-865-1160-e	
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period		
Candidate Name Thom R. Tillis Category/ Type				5000	
Office Sought: House Senate President Disburser	ment For: 2014 Primary				
State: NC District: Full Name (Last, First, Middle Initial)					
В.			Date of Disbursem	ent	
Mailing Address					
City	State Zip Code				
Purpose of Disbursement			Amount of Each Di	sbursement this Period	
Candidate Name Category Type			7		
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify)				
State: District: Full Name (Last, First, Middle Initial)					
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Candidate Name Category/ Type					
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SCHEDULE B (FEC Form 3X)			PAGE 14 OF 15	
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	Detailed Summary Page	21b 27	22 23 28b	
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NAME OF COMMITTEE (In Full)				
Kelly PAC				
Full Name (Last, First, Middle Initial)				
A. Nackey S. Loeb School of Communications, Inc.			Date of Disbursem	/ Y Y Y Y Y
Mailing Address 749 E Industrial Park Drive			10 16	2014
City	State Zip Code		Transaction ID :	SB29-772-1155-e
Manchester Purpose of Disbursement	NH 03109-5618			
Donation 012			Amount of Each D	isbursement this Period
Candidate Name		Category/ Type		1250
Office Sought: House Disburse	ement For:	Type		7
Senate	Primary General			
President State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial) B. Tim Dillon for Executive Council			Date of Disbursem	ent
			M = M / D = D	/ Y Y Y Y Y
Mailing Address 54 Bow Street			10 27	2014
City	State Zip Code		Transaction ID :	SB29-773-1159-e
Concord Purpose of Disbursement	NH 03301-2721			
Void Check	012	Amount of Each D	isbursement this Period	
Candidate Name	Category/ Type		-1000	
	ement For:			
Senate President	Primary General			
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Full Name (Last, First, Middle Initial)			D	
C.	Date of Disbursem	_		
Mailing Address			M M / D D	/
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Office Sought: House Disburse Senate President	ement For: Primary General Other (specify) ▼	· · · · · · · · · · · · · · · · · · ·		
State: District:				
SUBTOTAL of Disbursements This Page (optional)				250.00
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TOTAL This Period (last page this line number onl	y)			250.00

SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE FOR LINE NUMBER: (check only one)

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15 OF

NAME OF COMMITTEE (In Full) Kelly PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Administrative/Salary/Overhead: PAC The Gula Graham Group Event/Food & Beverage/Travel/Fax/Email/Shipping Mailing Address 499 S Capitol Street SW Suite 420 City State Zip Code Washington 20003-4027 Transaction ID: SD10-DEBT1154 Outstanding Balance Beginning This Period 18521.19 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 18521.19 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Administrative/Salary/Overhead: PAC Forward Strategy Partners, LLC **Fundraising Consulting** Mailing Address 526 Daroco Avenue City State Zip Code Coral Gables 33146-2713 FL Outstanding Balance Beginning This Period Transaction ID: SD10-DEBT1176 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 3750 0 3750 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Payment This Period Amount Incurred This Period Outstanding Balance at Close of This Period 3750.00 1) SUBTOTALS This Period This Page (optional)..... 3750.00 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 3750.00 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶