

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Fraternity & Sorority Political Action Committee

ADDRESS (number and street) PO Box 3435

Check if different than previously reported. (ACC)

Alexandria VA 22302

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00410068

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

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)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input checked="" type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

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

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on M M M / D D D / Y Y Y Y Y Y Y Y in the State of

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

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on M M M / D D D / Y Y Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y Y Y through M M M / D D D / Y Y Y Y Y Y Y Y

03 / 01 / 2014 through 03 / 31 / 2014

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

Type or Print Name of Treasurer Margee Clancy

Signature of Treasurer Margee Clancy *[Electronically Filed]* Date M M M / D D D / Y Y Y Y Y Y Y Y

04 / 19 / 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.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Fraternity & Sorority Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		125443.02
(b) Cash on Hand at Beginning of Reporting Period.....	144123.24	
(c) Total Receipts (from Line 19)	78626.00	106774.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	222749.24	232217.02
7. Total Disbursements (from Line 31).....	49418.38	58886.16
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	173330.86	173330.86
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	

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

Fraternity & Sorority Political Action Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	59525.00	84275.00
(ii) Unitemized	9826.00	13224.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	69351.00	97499.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	69351.00	97499.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	9275.00	9275.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	78626.00	106774.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	78626.00	106774.00

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	3353.88	11442.66
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3353.88	11442.66
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	46000.00	47000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	250.00
(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 28(a), (b), and (c)).....	0.00	250.00
29. Other Disbursements	64.50	193.50
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	49418.38	58886.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	49418.38	58886.16

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
33. Total Contributions (other than loans) (from Line 11(d), page 3)	69351.00	97499.00
34. Total Contribution Refunds (from Line 28(d))	0.00	250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	69351.00	97249.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3353.88	11442.66
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3353.88	11442.66

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 49
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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)
Fraternity & Sorority Political Action Committee

A. Allison Allgier
Full Name (Last, First, Middle Initial)

Mailing Address 4425 Camberwell Road

City Cincinnati State OH Zip Code 45209

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

Name of Employer Cincinnati Children's Hospital Occupation Occupational Therapist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 04 / 2014
Transaction ID : SA11Al.16414

Amount of Each Receipt this Period 250.00

Contribution

B. Ruth Alsbrooks
Full Name (Last, First, Middle Initial)

Mailing Address 133 Camellia Drive

City Mountain Brook State AL Zip Code 35213

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

Name of Employer Volunteer Occupation Volunteer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 05 / 2014
Transaction ID : SA11Al.16419

Amount of Each Receipt this Period 250.00

Contribution

C. Mr. Brad Beacham
Full Name (Last, First, Middle Initial)

Mailing Address 9 N Lewis Street

City Lexington State VA Zip Code 24450

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

Name of Employer Sigma Nu Fraternity Inc. Occupation Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2014
Transaction ID : SA11Al.16649

Amount of Each Receipt this Period 250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

A. Andrea Bechtel
Full Name (Last, First, Middle Initial)

Mailing Address 999 Lake Street

City Winnetka State IL Zip Code 60093

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

Name of Employer Volunteer Occupation Volunteer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 26 / 2014
Transaction ID : SA11AI.16593

Amount of Each Receipt this Period
500.00

Contribution

B. Kelley Bergstrom
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 510023

City Key Colony Beach State FL Zip Code 33051

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

Name of Employer Bergstrom Investment Occupation Private Investor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 29 / 2014
Transaction ID : SA11AI.16621

Amount of Each Receipt this Period
5000.00

Contribution

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

Mailing Address 5 W Mont Nord

City Fayetteville State AR Zip Code 72701

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

Name of Employer Wal-Mart Stores Inc. Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
03 / 20 / 2014
Transaction ID : SA11AI.16494

Amount of Each Receipt this Period
1500.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

A. Rosemary Brevard
Full Name (Last, First, Middle Initial)
Mailing Address 2 Haverhill Way

City San Antonio	State TX	Zip Code 78209
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 24 / 2014
Transaction ID : SA11AI.16532

Amount of Each Receipt this Period
500.00

Contribution

B. Ms. Sandra A. Burba
Full Name (Last, First, Middle Initial)
Mailing Address 457 Blue Water Drive

City Marblehead	State OH	Zip Code 43440
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FEC ID number of contributing federal political committee. **C**

Name of Employer Volunteer	Occupation Volunteer
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 21 / 2014
Transaction ID : SA11AI.16504

Amount of Each Receipt this Period
250.00

Contribution

C. Julie C. Burkhard
Full Name (Last, First, Middle Initial)
Mailing Address 923 Manor Parc Drive

City Decatur	State GA	Zip Code 30033
-----------------	-------------	-------------------

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

Name of Employer Phi Mu Foundation	Occupation Executive Director
---------------------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 / 31 / 2014
Transaction ID : SA11AI.16646

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 49
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)
A. Maureen Carnevale

Mailing Address PO Box 302

City Merrifield State VA Zip Code 22116

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

Name of Employer AWHONN Occupation VP of Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2014
Transaction ID : SA11Al.16483

Amount of Each Receipt this Period
500.00

Contribution

Full Name (Last, First, Middle Initial)
B. Marvin Carver

Mailing Address 4026 Dover Road

City Durham State NC Zip Code 27707

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

Name of Employer Merrill Lynch Occupation Financial Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : SA11Al.16638

Amount of Each Receipt this Period
250.00

Contribution

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

Mailing Address 1561 Loudon Heights Road

City Charleston State WV Zip Code 25314

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

Name of Employer Self-Employed Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2014
Transaction ID : SA11Al.16548

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 49
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

A. Donna Chereck
 Full Name (Last, First, Middle Initial)
 Mailing Address 8726 Arbor Park Court
 City Dallas State TX Zip Code 75243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Homemaker Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2014
Transaction ID : SA11AI.16489
 Amount of Each Receipt this Period
 1250.00
 Contribution

B. Mr. Robert A. Chereck
 Full Name (Last, First, Middle Initial)
 Mailing Address 8726 Arbor Park Court
 City Dallas State TX Zip Code 75243-8023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Southwest Securities FSB Occupation Executive Chairman
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2014
Transaction ID : SA11AI.16490
 Amount of Each Receipt this Period
 1250.00
 Contribution

C. Scott Cohon
 Full Name (Last, First, Middle Initial)
 Mailing Address 11307 Coral Reef Drive
 City Boca Raton State FL Zip Code 33498
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Breckenridge Pharmaceutical Occupation Director of Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2014
Transaction ID : SA11AI.16631
 Amount of Each Receipt this Period
 250.00
 Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 2750.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)
A. Laurie Connor

Mailing Address 1688 Powell Road

City Powell State OH Zip Code 43065

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

Name of Employer Self-Employed Occupation Property Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **03 / 04 / 2014**

Transaction ID : SA11AI.16404

Amount of Each Receipt this Period **500.00**

Contribution

Full Name (Last, First, Middle Initial)
B. Ms. Sandra M. Connor

Mailing Address 3505 Turtle Creek Blvd. 12A

City Dallas State TX Zip Code 75219

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **03 / 26 / 2014**

Transaction ID : SA11AI.16589

Amount of Each Receipt this Period **1000.00**

Contribution

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

Mailing Address 2200 17th Street NW, #107

City Washington State DC Zip Code 20009

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

Name of Employer The Conrad Group Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **03 / 12 / 2014**

Transaction ID : SA11AI.16455

Amount of Each Receipt this Period **250.00**

Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ **1750.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

A. Ms. Elizabeth Sierk Corridan
 Full Name (Last, First, Middle Initial)
 Mailing Address 9185 Stonington Place
 City Zionsville State IN Zip Code 46077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kappa Alpha Theta Occupation Executive Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2014
Transaction ID : SA11AI.16421
 Amount of Each Receipt this Period
 500.00
 Contribution

B. Ms. Kitty DeKieffer
 Full Name (Last, First, Middle Initial)
 Mailing Address 3002 Melissa Lane
 City Boulder State CO Zip Code 80301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Gamma Phi Beta Foundation Occupation Foundation Executive Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2014
Transaction ID : SA11AI.16590
 Amount of Each Receipt this Period
 250.00
 Contribution

C. Robert Derdiger
 Full Name (Last, First, Middle Initial)
 Mailing Address 8815 Wesleyan Road
 City Indianapolis State IN Zip Code 46268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Esponda Associates, Inc. Occupation Director of Housing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2014
Transaction ID : SA11AI.16492
 Amount of Each Receipt this Period
 500.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

A. Mary Ellen Fitzsimonds
 Full Name (Last, First, Middle Initial)
 Mailing Address 2639 Hurd Avenue
 City Evanston State IL Zip Code 60201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Volunteer Occupation Volunteer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2014
Transaction ID : SA11AI.16543
 Amount of Each Receipt this Period
 250.00
 Contribution

B. Ms. Marilyn M. Fordham
 Full Name (Last, First, Middle Initial)
 Mailing Address 6702 Morton Drive
 City Boise State ID Zip Code 83704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2014
Transaction ID : SA11AI.16411
 Amount of Each Receipt this Period
 250.00
 Contribution

C. Joe B. Francis
 Full Name (Last, First, Middle Initial)
 Mailing Address 4040 E 80th Street
 City Tulsa State OK Zip Code 74136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kivell, Rayment & Francis PC Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2014
Transaction ID : SA11AI.16575
 Amount of Each Receipt this Period
 250.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

A. Ms. Elisse Freeman
Full Name (Last, First, Middle Initial)
Mailing Address 6625 Muirfield Circle
City Plano State TX Zip Code 75093
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation Retired Retired
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1000.00**

Date of Receipt **03 / 11 / 2014**
Transaction ID : SA11Al.16446
Amount of Each Receipt this Period **1000.00**
Contribution

B. Robert Graham
Full Name (Last, First, Middle Initial)
Mailing Address 2909 Paddington Drive
City Plano State TX Zip Code 75093
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation HP / Autonomy Sales
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **225.00**

Date of Receipt **03 / 24 / 2014**
Transaction ID : SA11Al.16539
Amount of Each Receipt this Period **225.00**
Contribution

C. Alison Griffin
Full Name (Last, First, Middle Initial)
Mailing Address 1182 Washburn Ct.
City Erie State CO Zip Code 80516
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation USA Funds VP Policy Research
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 24 / 2014**
Transaction ID : SA11Al.16538
Amount of Each Receipt this Period **500.00**
Contribution

SUBTOTAL of Receipts This Page (optional)..... **1725.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

A. David Hagan
Full Name (Last, First, Middle Initial)

Mailing Address 2025 St. Andrews Road

City Greensboro State NC Zip Code 27408

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

Name of Employer Hagan Properties Inc. Occupation Commercial Realtor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2014
Transaction ID : SA11AI.16623

Amount of Each Receipt this Period
 2500.00

Contribution

B. Dinah Hays
Full Name (Last, First, Middle Initial)

Mailing Address 3030 McKinney Avenue #201

City Dallas State TX Zip Code 75204

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

Name of Employer Andres Construction Services Occupation CFO / VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : SA11AI.16645

Amount of Each Receipt this Period
 1000.00

Contribution

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

Mailing Address 10425 East Charter Oak

City Scottsdale State AZ Zip Code 85259

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

Name of Employer Arizona Benefit Plans, Inc. Occupation Executive Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2014
Transaction ID : SA11AI.16632

Amount of Each Receipt this Period
 1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 4500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)
A. Chrys Hyde

Mailing Address 1704 Jose Gaspar Drive

City State Zip Code
Boca Grande FL 33921

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 20 / 2014
Transaction ID : SA11AI.16495

Amount of Each Receipt this Period
2500.00

Contribution

Full Name (Last, First, Middle Initial)
B. Carole Jones

Mailing Address 117 Stargate Drive

City State Zip Code
Madison AL 35758

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 04 / 2014
Transaction ID : SA11AI.16413

Amount of Each Receipt this Period
250.00

Contribution

Full Name (Last, First, Middle Initial)
C. Eugene M. Julian

Mailing Address 104 Windward Rd.

City State Zip Code
Wilmington DE 19807

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 17 / 2014
Transaction ID : SA11AI.16482

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 49
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial) A. Dell Kingan		Date of Receipt 03 / 24 / 2014 Transaction ID : SA11AI.16564
Mailing Address 198 Needlerush Drive		Amount of Each Receipt this Period 250.00
City Santa Rosa Beach	State FL	Zip Code 32459
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Valerie Lawlor		Date of Receipt 03 / 24 / 2014 Transaction ID : SA11AI.16542
Mailing Address 6921 Westlake Avenue		Amount of Each Receipt this Period 500.00
City Dallas	State TX	Zip Code 75214
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Michael Lucas		Date of Receipt 03 / 22 / 2014 Transaction ID : SA11AI.16514
Mailing Address 1329 St. William Drive		Amount of Each Receipt this Period 500.00
City Libertyville	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Emerson Network Power	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

A. David Marino
Full Name (Last, First, Middle Initial)

Mailing Address 754 La Canada

City La Jolla State CA Zip Code 92037

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

Name of Employer Hughes Marino Occupation Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 21 / 2014
Transaction ID : SA11AI.16509

Amount of Each Receipt this Period
 250.00

Contribution

B. Richard McCormick
Full Name (Last, First, Middle Initial)

Mailing Address 3200 Cherry Creek South Drive Suite 230

City Denver State CO Zip Code 80209

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2014
Transaction ID : SA11AI.16525

Amount of Each Receipt this Period
 250.00

Contribution

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

Mailing Address 217 Buttles Avenue

City Columbus State OH Zip Code 43215

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

Name of Employer Delta Gamma Fraternity Occupation Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2014
Transaction ID : SA11AI.16567

Amount of Each Receipt this Period
 250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 49
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

A. Keith Moody
 Full Name (Last, First, Middle Initial)
 Mailing Address 2653 Park Tower Drive
 Unit 104
 City Vienna State VA Zip Code 22180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ExxonMobil Occupation Advisor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 11 / 2014
Transaction ID : SA11AI.16450
 Amount of Each Receipt this Period
500.00
 Contribution

B. Glenn Moor
 Full Name (Last, First, Middle Initial)
 Mailing Address 6204 17th Street
 City Lubbock State TX Zip Code 79416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Southeast Surplus Occupation Marketing Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : SA11AI.16640
 Amount of Each Receipt this Period
250.00
 Contribution

C. Nicholas Murphy
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 756
 City Lexington State VA Zip Code 22450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sigma Nu Fraternity Occupation CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2014
Transaction ID : SA11AI.16586
 Amount of Each Receipt this Period
250.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 OF 49
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

A. George Nelson
Full Name (Last, First, Middle Initial)

Mailing Address 1501 Avenue K

City Lubbock	State TX	Zip Code 79401
-----------------	-------------	-------------------

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

Name of Employer Lubbock Private Defenders	Occupation Director
---	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2014

Transaction ID : SA11Al.16477

Amount of Each Receipt this Period
250.00

Contribution

B. Claudia M. Nemir
Full Name (Last, First, Middle Initial)

Mailing Address 1566 Ramona Way

City Alamo	State CA	Zip Code 94507
---------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	29	/	2014

Transaction ID : SA11Al.16619

Amount of Each Receipt this Period
500.00

Contribution

C. Ms. Carol J. Nunnally
Full Name (Last, First, Middle Initial)

Mailing Address 1550 Dunrovin Lane

City Salem	State VA	Zip Code 24153
---------------	-------------	-------------------

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

Name of Employer Volunteer	Occupation Volunteer
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	29	/	2014

Transaction ID : SA11Al.16629

Amount of Each Receipt this Period
150.00

Contribution

SUBTOTAL of Receipts This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

A. Mr. Kevin O'Neill
Full Name (Last, First, Middle Initial)

Mailing Address 264 Sir Thomas Lundsford Drive

City Williamsburg	State VA	Zip Code 23185
----------------------	-------------	-------------------

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

Name of Employer PattonBoggs LLP	Occupation Lobbyist/Attorney
-------------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 27 / 2014
Transaction ID : SA11AI.16594

Amount of Each Receipt this Period
5000.00

Contribution

B. William Paris
Full Name (Last, First, Middle Initial)

Mailing Address 1235 Sheridan Road

City Atlanta	State GA	Zip Code 30324
-----------------	-------------	-------------------

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

Name of Employer The Laurus Group	Occupation Fundraiser
--------------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 21 / 2014
Transaction ID : SA11AI.16500

Amount of Each Receipt this Period
250.00

Contribution

C. Susan K. Patrick
Full Name (Last, First, Middle Initial)

Mailing Address 13325 Westmeath Lane

City Clarksville	State MD	Zip Code 21029
---------------------	-------------	-------------------

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

Name of Employer Patrick Communications	Occupation Media Broker
--	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 13 / 2014
Transaction ID : SA11AI.16460

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional).....	10250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

A. Michael Paulin
Full Name (Last, First, Middle Initial)

Mailing Address 11716 Oakland Hills Drive

City Las Vegas State NV Zip Code 89141

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

Name of Employer Aqua Hotels Occupation Founder & Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2014
Transaction ID : SA11AI.16610

Amount of Each Receipt this Period
 500.00

Contribution

B. Julie P. Pawelczyk
Full Name (Last, First, Middle Initial)

Mailing Address 215 E Chestnut Street #1802

City Chicago State IL Zip Code 60611

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

Name of Employer Federal Strategy Consulting Occupation Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 11 / 2014
Transaction ID : SA11AI.16443

Amount of Each Receipt this Period
 500.00

Contribution

C. Mr. Ed Pease
Full Name (Last, First, Middle Initial)

Mailing Address 5147 E. Old Maple Avenue

City Terre Haute State IN Zip Code 47803

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

Name of Employer Rolls-Royce North America Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2014
Transaction ID : SA11AI.16622

Amount of Each Receipt this Period
 1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 OF 49
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

A. Mr. Howard C. Pickett
Full Name (Last, First, Middle Initial)

Mailing Address 1021 Goodworth Drive

City	State	Zip Code
Apex	NC	27539

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

Name of Employer	Occupation
George E. Pickett & Assoc. Inc	President/Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2014

Transaction ID : SA11AI.16547

Amount of Each Receipt this Period
250.00

Contribution

B. Anne Pogson
Full Name (Last, First, Middle Initial)

Mailing Address 12112 Talmy

City	State	Zip Code
Dallas	TX	75230

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

Name of Employer	Occupation
Volunteer	Volunteer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2014

Transaction ID : SA11AI.16501

Amount of Each Receipt this Period
250.00

Contribution

C. Ms. Eve Woods Riley
Full Name (Last, First, Middle Initial)

Mailing Address 2816 Lindsey Hollow Road

City	State	Zip Code
Waco	TX	76708

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

Name of Employer	Occupation
Volunteer	Volunteer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2014

Transaction ID : SA11AI.16442

Amount of Each Receipt this Period
350.00

Contribution

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 49
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

A. Jeffrey Risser
 Full Name (Last, First, Middle Initial)
 Mailing Address 7939 Windcombe Blvd.
 City Indianapolis State IN Zip Code 46240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kappa Alpha Theta Fraternity Occupation Director of Finance
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **03 / 13 / 2014**
Transaction ID : SA11AI.16459
 Amount of Each Receipt this Period **250.00**
 Contribution

B. Christine Rocchio
 Full Name (Last, First, Middle Initial)
 Mailing Address 4525 River Road NW
 City Washington State DC Zip Code 20016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Washington Hospital Center Occupation Nurse Practitioner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 22 / 2014**
Transaction ID : SA11AI.16511
 Amount of Each Receipt this Period **500.00**
 Contribution

C. Loretta P. Roselle
 Full Name (Last, First, Middle Initial)
 Mailing Address 10955 Andrews Place
 City Fishers State IN Zip Code 46037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Liniger Co., Inc. Occupation Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 04 / 2014**
Transaction ID : SA11AI.16409
 Amount of Each Receipt this Period **500.00**
 Contribution

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial) A. Dennis Santoli		Date of Receipt
Mailing Address 1751 Wexford Way		<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
Vienna	VA	22182
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.16445
The Hanover Insurance Group	Executive	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	<input type="text" value="500.00"/>
		Contribution

Full Name (Last, First, Middle Initial) B. James Wilson Schulz		Date of Receipt
Mailing Address 1801 Commerce Court		<input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
Columbia	MO	65202
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.16611
Self-Employed	Business Owner	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	<input type="text" value="250.00"/>
		Contribution

Full Name (Last, First, Middle Initial) C. Mrs. Elizabeth Searcy		Date of Receipt
Mailing Address 12008 Sawhill Blvd.		<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City	State	Zip Code
Spotsylvania	VA	22553
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.16417
University of Mary Washington	Asst. Dean of Academic Svs.	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	<input type="text" value="250.00"/>
		Contribution

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 26 OF 49
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)
A. Bill Skipper

Mailing Address 2625 Sledding Hill Road

City State Zip Code
Oakton SC 22124

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

Name of Employer Occupation
American Business Dev. Group President / CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2014
Transaction ID : SA11AI.16479

Amount of Each Receipt this Period
250.00

Contribution

Full Name (Last, First, Middle Initial)
B. Virginia H. Smith

Mailing Address 2664 River Oak Drive

City State Zip Code
Decatur GA 30033

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

Name of Employer Occupation
Emory University Library Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2014
Transaction ID : SA11AI.16615

Amount of Each Receipt this Period
2500.00

Contribution

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

Mailing Address 6501 Sussex Drive

City State Zip Code
Zionsville IN 46077

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

Name of Employer Occupation
NIC CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2014
Transaction ID : SA11AI.16434

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 3250.00

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

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

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

FOR LINE NUMBER: PAGE 27 OF 49
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)
A. Peter J. Stephens
 Mailing Address 637 Woodward Street
 City State Zip Code
 Orlando FL 32803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Lotus Hospitality Internationa Management Consultant
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 12 / 2014
Transaction ID : SA11Al.16453
 Amount of Each Receipt this Period
 500.00
 Contribution

Full Name (Last, First, Middle Initial)
B. L. Wayne Tucker
 Mailing Address 4202 Southcrest
 City State Zip Code
 Dallas TX 75229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 F & M Bank President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 11 / 2014
Transaction ID : SA11Al.16447
 Amount of Each Receipt this Period
 250.00
 Contribution

Full Name (Last, First, Middle Initial)
C. Cheri Wechsler
 Mailing Address 25652 Bradford Lane
 City State Zip Code
 Laguna Hills CA 92653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Homemaker Homemaker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2014
Transaction ID : SA11Al.16587
 Amount of Each Receipt this Period
 250.00
 Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)
A. Edward Weisiger

Mailing Address PO Box 1095

City Charlotte State NC Zip Code 28201

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

Name of Employer Carolina Tractor Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2014
Transaction ID : SA11AI.16468

Amount of Each Receipt this Period
5000.00

Contribution

Full Name (Last, First, Middle Initial)
B. Lora M. White

Mailing Address 17491 Amaganset Way

City Tustin State CA Zip Code 92780

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

Name of Employer Mission Hospital Occupation Social Worker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2014
Transaction ID : SA11AI.16588

Amount of Each Receipt this Period
250.00

Contribution

Full Name (Last, First, Middle Initial)
C. Mr. Mark A. Williams

Mailing Address 3393 Eden Way Circle

City Carmel State IN Zip Code 46033

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

Name of Employer Psi Upsilon Fraternity Occupation Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2014
Transaction ID : SA11AI.16541

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 5500.00

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

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

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

FOR LINE NUMBER: PAGE 29 OF 49
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)
A. Susan L. Wilson

Mailing Address 7952 N Placita del Chango

City Tucson	State AZ	Zip Code 85704
----------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2014

Transaction ID : SA11Al.16441

Amount of Each Receipt this Period
300.00

Contribution

Full Name (Last, First, Middle Initial)
B. Allen Woody

Mailing Address 5200 Fox Ridge Road

City Roanoke	State VA	Zip Code 24018
-----------------	-------------	-------------------

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

Name of Employer SPM Corporation	Occupation President
-------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2014

Transaction ID : SA11Al.16408

Amount of Each Receipt this Period
2500.00

Contribution

Full Name (Last, First, Middle Initial)
C. Ms. Bonnie R. Wunsch

Mailing Address 42 Tucker Street

City Danbury	State CT	Zip Code 06810
-----------------	-------------	-------------------

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

Name of Employer Alpha Epsilon Phi Sorority	Occupation Executive Director
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2014

Transaction ID : SA11Al.16518

Amount of Each Receipt this Period
1250.00

Contribution

SUBTOTAL of Receipts This Page (optional).....▶	4050.00
TOTAL This Period (last page this line number only).....▶	59525.00

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

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

FOR LINE NUMBER: PAGE 30 OF 49
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)
A. Alpha Epsilon Phi Building Corporation - Tulane
 Mailing Address 14611 Labelle
 City State Zip Code
 Oak Park MI 48237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2014
Transaction ID : SA17.16682
 Amount of Each Receipt this Period
 250.00
 Non-Contribution Account

Full Name (Last, First, Middle Initial)
B. Alpha Epsilon Phi Sorority - Alpha Mu Chapter
 Mailing Address 420 W Patrick St.
 City State Zip Code
 Frederick MD 21701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2014
Transaction ID : SA17.16666
 Amount of Each Receipt this Period
 750.00
 Non-Contribution Account

Full Name (Last, First, Middle Initial)
C. Alpha of Alpha Phi - The Michaelanean Society, Inc.
 Mailing Address 308 Walnut Place
 City State Zip Code
 Syracuse NY 13210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2014
Transaction ID : SA17.16676
 Amount of Each Receipt this Period
 250.00
 Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 49
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)
A. Alpha Phi Building Corporation - UC Berkeley

Mailing Address 2830 Bancroft Steps

City Berkeley	State CA	Zip Code 94704
------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	24	/	2014

Transaction ID : SA17.16658

Amount of Each Receipt this Period
1000.00

Non-Contribution Account

Full Name (Last, First, Middle Initial)
B. Alpha Phi Chapter House Assn. - Iota

Mailing Address 28 Langdon Street

City Madison	State WI	Zip Code 53703
-----------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	29	/	2014

Transaction ID : SA17.16685

Amount of Each Receipt this Period
250.00

Non-Contribution Account

Full Name (Last, First, Middle Initial)
C. Alpha Phi International Fraternity Delta Alpha HCB

Mailing Address 107 Commerce Street

City Greenville	State NC	Zip Code 27858
--------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	29	/	2014

Transaction ID : SA17.16678

Amount of Each Receipt this Period
250.00

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 49
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)
A. Alpha Psi House Corporation of Delta Gamma - University of MS

Mailing Address 3220 Riverside Drive
Ste. A-2

City Columbus State OH Zip Code 43221

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 / 24 / 2014
Transaction ID : SA17.16656

Amount of Each Receipt this Period
1000.00

Non-Contribution Account

Full Name (Last, First, Middle Initial)
B. Beta Psi of Alpha Phi, Inc.

Mailing Address 5050 Laguna Blvd.
Ste. 112 - PMB 323

City Elk Grove State CA Zip Code 95758

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 29 / 2014
Transaction ID : SA17.16683

Amount of Each Receipt this Period
250.00

Non-Contribution Account

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

Mailing Address 363 W Big Beaver
Ste. 400

City Troy State MI Zip Code 48084

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 / 29 / 2014
Transaction ID : SA17.16663

Amount of Each Receipt this Period
1000.00

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶	2250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 49
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)
A. Delta Gamma Fraternity Housing Corp.

Mailing Address 3220 Riverside Drive
Ste. A-2

City Columbus State OH Zip Code 43221

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 / 08 / 2014
Transaction ID : SA17.16653

Amount of Each Receipt this Period
1000.00

Non-Contribution Account

Full Name (Last, First, Middle Initial)
B. Epsilon Beta House Corp. Board - Alpha Phi

Mailing Address 8425 Woodfield Crossing Blvd.
Ste. 110

City Indianapolis State IN Zip Code 46240

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
03 / 24 / 2014
Transaction ID : SA17.16660

Amount of Each Receipt this Period
300.00

Non-Contribution Account

Full Name (Last, First, Middle Initial)
C. Hug & Associates, LLC

Mailing Address 3010 Royal Blvd. South
Ste. 250

City Alpharetta State GA Zip Code 30022

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 04 / 2014
Transaction ID : SA17.16651

Amount of Each Receipt this Period
500.00

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶	1800.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 34 OF 49
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)
A. K.S.U. Alpha Phi House Corporation Board

Mailing Address 118 West Streetsboro Road
 PMB 158

City Hudson State OH Zip Code 44236

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 03 / 12 / 2014
Transaction ID : SA17.16654

Amount of Each Receipt this Period
 250.00

Non-Contribution Account

Full Name (Last, First, Middle Initial)
B. Lambda Nu Graduate Association

Mailing Address PO Box 81893

City Lincoln State NE Zip Code 68501

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 03 / 29 / 2014
Transaction ID : SA17.16674

Amount of Each Receipt this Period
 500.00

Non-Contribution Account

Full Name (Last, First, Middle Initial)
C. Omega Building Co. of Austin, TX

Mailing Address 2500 Rio Grande Street

City Austin State TX Zip Code 78705

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 03 / 29 / 2014
Transaction ID : SA17.16673

Amount of Each Receipt this Period
 1000.00

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	8550.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. Elavon

Mailing Address One Concourse Parkway

City Atlanta State GA Zip Code 30328

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		03		2014

Transaction ID : SB21B.16687

Amount of Each Disbursement this Period

97.93

Category/
Type

Full Name (Last, First, Middle Initial)

B. MAXimum Compliance, LLC

Mailing Address 4703 Woodway Lane, NW

City Washington State DC Zip Code 20016

Purpose of Disbursement
Compliance & Bookkeeping Services

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		10		2014

Transaction ID : SB21B.16691

Amount of Each Disbursement this Period

567.45

Category/
Type

Full Name (Last, First, Middle Initial)

C. Omega Financial Inc.

Mailing Address P. O. Box 2207

City Columbus State GA Zip Code 31902

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : SB21B.16689

Amount of Each Disbursement this Period

1067.04

Category/
Type

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

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

1732.42

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. PattonBoggs, LLP

Mailing Address 2550 M Street, NW

City Washington State DC Zip Code 20037

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	27	/	2014

Transaction ID : SB21B.16754

Amount of Each Disbursement this Period

442.50

Full Name (Last, First, Middle Initial)

B. Pennington & Co.

Mailing Address 501 Gateway Drive Suite A

City Lawrence State KS Zip Code 66049-2342

Purpose of Disbursement
Gen. Fundraising, Printing, Production, Shipping, Donor Contact, Non-Candidate

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	27	/	2014

Transaction ID : SB21B.16753

Amount of Each Disbursement this Period

642.51

Full Name (Last, First, Middle Initial)

C. The Rap Index, Inc.

Mailing Address 244 Adley Way

City Greenville State SC Zip Code 29607

Purpose of Disbursement
Advocacy Software, non-candidate

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	10	/	2014

Transaction ID : SB21B.16693

Amount of Each Disbursement this Period

500.00

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

1585.01

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

3317.43

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. BILLY LONG FOR CONGRESS

Mailing Address 3246 E. RIDGEVIEW STREET

City SPRINGFIELD State MO Zip Code 65804

Purpose of Disbursement
Contribution

Candidate Name

BILLY LONG

Office Sought: House
 Senate
 President

State: MO District: 07

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	1	4

Transaction ID : SB23.16700

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. BRADY FOR CONGRESS

Mailing Address P.O. Box 8277

City The Woodlands State TX Zip Code 77387

Purpose of Disbursement
Contribution

Candidate Name

KEVIN PATRICK BRADY

Office Sought: House
 Senate
 President

State: TX District: 08

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	1	4

Transaction ID : SB23.16694

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. BRALEY FOR IOWA

Mailing Address PO BOX 856

City DES MOINES State IA Zip Code 50304

Purpose of Disbursement
Contribution

Candidate Name

BRUCE L BRALEY

Office Sought: House
 Senate
 President

State: IA District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	1	4

Transaction ID : SB23.16744

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0

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

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

8	0	0	0	0	0	0	0	0	0

0	0	0	0	0	0	0	0	0	0

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Grid for line numbers: 21b, 22, 23 (checked), 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. CANTOR FOR CONGRESS

Mailing Address P. O. Box 17813

City Richmond State VA Zip Code 23226

Purpose of Disbursement Contribution

Candidate Name

ERIC CANTOR

Office Sought: [X] House [] Senate [] President
State: VA District: 07

Disbursement For: 2014
[X] Primary [] General
[] Other (specify) v

Category/Type

Date of Disbursement

Date grid: MM/DD/YYYY = 03/21/2014

Transaction ID : SB23.16696

Amount of Each Disbursement this Period

Amount grid: 1000.00

Full Name (Last, First, Middle Initial)

B. CAPITO FOR WEST VIRGINIA

Mailing Address PO BOX 11519

City CHARLESTON State WV Zip Code 25339

Purpose of Disbursement Contribution

Candidate Name

SHELLEY MOORE CAPITO

Office Sought: [] House [X] Senate [] President
State: WV District: 00

Disbursement For: 2014
[] Primary [X] General
[] Other (specify) v

Category/Type

Date of Disbursement

Date grid: MM/DD/YYYY = 03/21/2014

Transaction ID : SB23.16730

Amount of Each Disbursement this Period

Amount grid: 5000.00

Full Name (Last, First, Middle Initial)

C. CASTOR FOR CONGRESS

Mailing Address 301 W. PLATT STREET, #385

City TAMPA State FL Zip Code 33606

Purpose of Disbursement Contribution

Candidate Name

KATHY CASTOR

Office Sought: [X] House [] Senate [] President
State: FL District: 11

Disbursement For: 2014
[X] Primary [] General
[] Other (specify) v

Category/Type

Date of Disbursement

Date grid: MM/DD/YYYY = 03/21/2014

Transaction ID : SB23.16707

Amount of Each Disbursement this Period

Amount grid: 1000.00

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

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

Subtotal grid: 7000.00

Total grid: 7000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)
A. CITIZENS FOR COCHRAN

Mailing Address PO BOX 7183

City TUPELO State MS Zip Code 38802

Purpose of Disbursement Contribution

Candidate Name **THAD COCHRAN**

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify) ▼

State: MS District: 00

Date of Disbursement: 03 / 21 / 2014

Transaction ID : **SB23.16731**

Amount of Each Disbursement this Period: 1000.00

Full Name (Last, First, Middle Initial)
B. CONYERS FOR CONGRESS

Mailing Address PO BOX 70980

City WASHINGTON State DC Zip Code 20024

Purpose of Disbursement Contribution

Candidate Name **JOHN CONYERS Jr.**

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify) ▼

State: MI District: 13

Date of Disbursement: 03 / 21 / 2014

Transaction ID : **SB23.16710**

Amount of Each Disbursement this Period: 1000.00

Full Name (Last, First, Middle Initial)
C. CORY GARDNER FOR SENATE

Mailing Address 9227 E. LINCOLN AVE., #200-234

City LONE TREE State CO Zip Code 80124

Purpose of Disbursement Contribution

Candidate Name **CORY GARDNER**

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify) ▼

State: CO District: 00

Date of Disbursement: 03 / 21 / 2014

Transaction ID : **SB23.16741**

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. DAVE CAMP FOR CONGRESS

Mailing Address 5915 EASTMAN AVENUE
SUITE 100

City MIDLAND State MI Zip Code 48640

Purpose of Disbursement
Contribution

Candidate Name
DAVID LEE CAMP

Office Sought: House
 Senate
 President
State: MI District: 04

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 21 / 2014

Transaction ID : SB23.16695

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. ENZI FOR US SENATE

Mailing Address PO BOX 2775

City CODY State WY Zip Code 82414

Purpose of Disbursement
Contribution

Candidate Name
MICHAEL B ENZI

Office Sought: House
 Senate
 President
State: WY District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 21 / 2014

Transaction ID : SB23.16732

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FREDERICA S. WILSON FOR CONGRESS

Mailing Address 19821 NW 2ND AVENUE
BOX 354

City MIAMI GARDENS State FL Zip Code 33169

Purpose of Disbursement
Contribution

Candidate Name
FREDERICA S. WILSON

Office Sought: House
 Senate
 President
State: FL District: 17

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 21 / 2014

Transaction ID : SB23.16728

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JIM CLYBURN

Mailing Address PO Box 12567

City Columbia State SC Zip Code 29211

Purpose of Disbursement Contribution

Candidate Name

JAMES E CLYBURN

Office Sought: House Senate President

State: SC District: 06

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	1	4

Transaction ID : SB23.16709

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF MICHELLE

Mailing Address P.O. BOX 25422

City ALBUQUERQUE State NM Zip Code 87125

Purpose of Disbursement Contribution

Candidate Name

MICHELLE LUJAN GRISHAM

Office Sought: House Senate President

State: NM District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	1	4

Transaction ID : SB23.16713

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

1000.00

Full Name (Last, First, Middle Initial)

C. HAGAN FOR US SENATE INC

Mailing Address PO BOX 29103

City GREENSBORO State NC Zip Code 27429

Purpose of Disbursement Contribution

Candidate Name

KAY R. HAGAN

Office Sought: House Senate President

State: NC District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	1	4

Transaction ID : SB23.16751

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

1000.00

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

3	0	0	0	0	0	0	0	0	0
3	0	0	0	0	0	0	0	0	0

3000.00

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

3	0	0	0	0	0	0	0	0	0
3	0	0	0	0	0	0	0	0	0

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. HOYER FOR CONGRESS

Mailing Address 700 13TH STREET, NW
SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement Contribution

Candidate Name
STENY HAMILTON HOYER

Office Sought: House Senate President
State: MD District: 05

Disbursement For: 2014
 Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 21 / 2014

Transaction ID : **SB23.16714**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. JIM RENACCI FOR CONGRESS

Mailing Address 150 Smokerise Drive

City Wadsworth State OH Zip Code 44281

Purpose of Disbursement Contribution

Candidate Name
JAMES B RENACCI

Office Sought: House Senate President
State: OH District: 16

Disbursement For: 2014
 Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 21 / 2014

Transaction ID : **SB23.16703**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. JOHN LEWIS FOR CONGRESS

Mailing Address P.O. BOX 2323

City ATLANTA State GA Zip Code 30301

Purpose of Disbursement Contribution

Candidate Name
JOHN R. LEWIS

Office Sought: House Senate President
State: GA District: 05

Disbursement For: 2014
 Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 21 / 2014

Transaction ID : **SB23.16721**

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Grid for line numbers 21b through 30b, with line 23 checked.

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. KIND FOR CONGRESS COMMITTEE

Mailing Address 205 5TH AVENUE SOUTH

City LA CROSSE State WI Zip Code 54601

Purpose of Disbursement Contribution

Candidate Name RONALD J. KIND

Office Sought: [X] House [] Senate [] President
State: WI District: 03

Disbursement For: 2014
[X] Primary [] General
[] Other (specify) v

Date of Disbursement

Date input fields: MM/DD/YYYY = 03/21/2014

Transaction ID : SB23.16715

Amount of Each Disbursement this Period

Amount input field: 1000.00

Full Name (Last, First, Middle Initial)

B. KLINE FOR CONGRESS

Mailing Address 350 W BURNSVILLE PKWY STE 375

City BURNSVILLE State MN Zip Code 55337

Purpose of Disbursement Contribution

Candidate Name JOHN PAUL KLINE JR

Office Sought: [X] House [] Senate [] President
State: MN District: 02

Disbursement For: 2014
[X] Primary [] General
[] Other (specify) v

Date of Disbursement

Date input fields: MM/DD/YYYY = 03/21/2014

Transaction ID : SB23.16699

Amount of Each Disbursement this Period

Amount input field: 1000.00

Full Name (Last, First, Middle Initial)

C. LARSON FOR CONGRESS

Mailing Address PO BOX 261172

City HARTFORD State CT Zip Code 06126

Purpose of Disbursement Contribution

Candidate Name JOHN B LARSON

Office Sought: [X] House [] Senate [] President
State: CT District: 01

Disbursement For: 2014
[] Primary [] General
[X] Other (specify) v Convention

Date of Disbursement

Date input fields: MM/DD/YYYY = 03/21/2014

Transaction ID : SB23.16718

Amount of Each Disbursement this Period

Amount input field: 1000.00

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

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

Subtotal input field: 3000.00

Total input field: (empty)

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. LEVIN FOR CONGRESS

Mailing Address PO BOX 37

City ROSEVILLE State MI Zip Code 48066

Purpose of Disbursement
Contribution

Candidate Name
SANDER M. LEVIN

Office Sought: House
 Senate
 President
State: MI District: 09

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			21			2014			

Transaction ID : SB23.16722

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. LYNN JENKINS FOR CONGRESS

Mailing Address PO Box 1441

City Topeka State KS Zip Code 66601

Purpose of Disbursement
Contribution

Candidate Name
LYNN JENKINS

Office Sought: House
 Senate
 President
State: KS District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			21			2014			

Transaction ID : SB23.16697

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. MARCIA FUDGE FOR CONGRESS

Mailing Address 3729 SILSBY RD

City UNIVERSITY HEIGHTS State OH Zip Code 44118

Purpose of Disbursement
Contribution

Candidate Name
MARCIA L FUDGE

Office Sought: House
 Senate
 President
State: OH District: 11

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			21			2014			

Transaction ID : SB23.16711

Amount of Each Disbursement this Period

2500.00

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

4500.00

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)
A. PALAZZO FOR CONGRESS

Mailing Address 13155 HIGHWAY 67 SUITE B

City BILOXI State MS Zip Code 39532

Purpose of Disbursement Contribution

Candidate Name **STEVEN MCCARTY PALAZZO**

Office Sought: House Senate President
 Disbursement For: 2014 Primary General Other (specify) ▼

State: MS District: 04

Date of Disbursement: 03 / 21 / 2014

Transaction ID : **SB23.16701**

Amount of Each Disbursement this Period: 1000.00

Full Name (Last, First, Middle Initial)
B. PAT ROBERTS FOR US SENATE INC

Mailing Address PO BOX 433

City GREAT BEND State KS Zip Code 67530

Purpose of Disbursement Contribution

Candidate Name **PAT ROBERTS**

Office Sought: House Senate President
 Disbursement For: 2014 Primary General Other (specify) ▼

State: KS District: 00

Date of Disbursement: 03 / 21 / 2014

Transaction ID : **SB23.16738**

Amount of Each Disbursement this Period: 1000.00

Full Name (Last, First, Middle Initial)
C. PITTENGER FOR CONGRESS LLC

Mailing Address PO BOX 11207

City CHARLOTTE State NC Zip Code 28220

Purpose of Disbursement Contribution

Candidate Name **Hon. ROBERT M. PITTENGER**

Office Sought: House Senate President
 Disbursement For: 2014 Primary General Other (specify) ▼

State: NC District: 09

Date of Disbursement: 03 / 21 / 2014

Transaction ID : **SB23.16702**

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. RYAN FOR CONGRESS, INC.

Mailing Address PO BOX 1488

City JANESVILLE State WI Zip Code 53547

Purpose of Disbursement
Contribution

Candidate Name

PAUL D. RYAN

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	1			2	0	1	4		

Transaction ID : SB23.16705

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

B. SCOTT FOR CONGRESS

Mailing Address POST OFFICE BOX 251

City NEWPORT NEWS State VA Zip Code 23607

Purpose of Disbursement
Contribution

Candidate Name

ROBERT C. SCOTT

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: VA District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	1			2	0	1	4		

Transaction ID : SB23.16725

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. STEVE DAINES for MONTANA

Mailing Address PO BOX 1598

City HELENA State MT Zip Code 59624

Purpose of Disbursement
Contribution

Candidate Name

STEVEN DAINES

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MT District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	1			2	0	1	4		

Transaction ID : SB23.16739

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

4	5	0	0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

4	5	0	0	.	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. TEAM GRAHAM INC

Mailing Address PO BOX 1801

City COLUMBIA State SC Zip Code 29202

Purpose of Disbursement
Contribution

Candidate Name

LINDSEY OLIN GRAHAM

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: SC District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			21			2014			

Transaction ID : SB23.16735

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. WYDEN FOR SENATE

Mailing Address 232 NE 9TH AVENUE

City PORTLAND State OR Zip Code 97232

Purpose of Disbursement
Contribution

Candidate Name

RONALD L. WYDEN

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OR District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			21			2014			

Transaction ID : SB23.16747

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. YARMUTH FOR CONGRESS

Mailing Address 1815 BROWNSBORO ROAD

City LOUISVILLE State KY Zip Code 40206

Purpose of Disbursement
Contribution

Candidate Name

JOHN A YARMUTH

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: KY District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			21			2014			

Transaction ID : SB23.16729

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. YODER FOR CONGRESS

Mailing Address PO BOX 26742

City OVERLAND PARK State KS Zip Code 66225

Purpose of Disbursement
Contribution

Candidate Name
KEVIN YODER

Office Sought: House
 Senate
 President
State: KS District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2014

Transaction ID : SB23.16706

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

1000.00

46000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. MAXimum Compliance, LLC

Mailing Address 4703 Woodway Lane, NW

City Washington State DC Zip Code 20016

Purpose of Disbursement
Non-Contribution Account - Compliance & Bookkeeping Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 10 / 2014

Transaction ID : SB29.16692

Amount of Each Disbursement this Period

45.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

45.00

45.00