



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**STOP HILLARY PAC**

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="2013"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="21010.33"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="274023.76"/>	<input type="text" value="295034.09"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="295034.09"/>	<input type="text" value="295034.09"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="235955.84"/>	<input type="text" value="235955.84"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="59078.25"/>	<input type="text" value="59078.25"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

Write or Type Committee Name

**STOP HILLARY PAC**

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).....	7095.00	7095.00
(ii) Unitemized .....	138762.66	140923.66
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	145857.66	148018.66
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	150.00	150.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	146007.66	148168.66
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.).....	128016.10	146865.43
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))..... ▶	274023.76	295034.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	274023.76	295034.09

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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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 .....	121696.71	121696.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	121696.71	121696.71
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	125.00	125.00
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	0.00
(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	0.00
29. Other Disbursements .....	114134.13	114134.13
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)) ..	235955.84	235955.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	235955.84	235955.84

**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) .....	146007.66	148168.66
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	146007.66	148168.66
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	121696.71	121696.71
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	121696.71	121696.71

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA  
Transaction ID :

This amendment corrects various errors discovered in the auditing process with respect to unitemized contributions and transaction processing fees.

Form/Schedule:  
Transaction ID:

**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 69
	<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	

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)  
**STOP HILLARY PAC**

**A. Margaret Adams**  
Full Name (Last, First, Middle Initial)  
Mailing Address 8240 Healy Dr  
City State Zip Code  
Mobile AL 36695  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
None Retired  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 14 / 2013  
**Transaction ID : SA11AI.98779**  
Amount of Each Receipt this Period  
25.00

**B. Byron Anderson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2021 Huntington Lane  
City State Zip Code  
Fort Worth TX 76110  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
none retired  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 25 / 2013  
**Transaction ID : SA11AI.96091**  
Amount of Each Receipt this Period  
50.00

**C. Richard Andrews JR**  
Full Name (Last, First, Middle Initial)  
Mailing Address 125 Twin Bridge Rd  
City State Zip Code  
Madison CT 06443-0000  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
None Retired  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 25 / 2013  
**Transaction ID : SA11AI.98968**  
Amount of Each Receipt this Period  
80.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 155.00  
**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 8 OF 69  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)  
**A. Richard Bennett**

Mailing Address 1694 E. Hayden Ave.

City State Zip Code  
Hayden Lake ID 83835

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 ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 18 / 2013  
**Transaction ID : SA11AI.103941**

Amount of Each Receipt this Period  
800.00

Full Name (Last, First, Middle Initial)  
**B. Robert Bradley**

Mailing Address 2200 Willowick Rd Unit 14C

City State Zip Code  
Houston TX 77027

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  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2013  
**Transaction ID : SA11AI.94434**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. ARTHUR BROUTON**

Mailing Address 156 GULFSTRReAMDR

City State Zip Code  
Tequesta FL 33469-2085

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  
 12 / 31 / 2013  
**Transaction ID : SA11AI.104210**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 800.00

**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 69  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)  
**A. Jerry Cole**

Mailing Address 10401 S 750 E

City Walkerton      State IN      Zip Code 46574

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

Name of Employer None      Occupation Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2013  
**Transaction ID : SA11AI.98911**

Amount of Each Receipt this Period  
60.00

Full Name (Last, First, Middle Initial)  
**B. Mae Dawson**

Mailing Address P.O. Box 157

City Fulton      State TX      Zip Code 78358

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

Name of Employer The Bag Lady      Occupation Gerbage service

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 25 / 2013  
**Transaction ID : SA11AI.98932**

Amount of Each Receipt this Period  
80.00

Full Name (Last, First, Middle Initial)  
**C. John Edgeworth**

Mailing Address 8776 Pebble Creek Ln.

City Sarasota      State FL      Zip Code 34238

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  
 09 / 18 / 2013  
**Transaction ID : SA11AI.103874**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 240.00

**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 10 OF 69  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)  
**A. Marion Garden**

Mailing Address 240 S Washington St.

City Baltimore State MD Zip Code 21231-2619

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  
 09 / 18 / 2013  
**Transaction ID : SA11AI.103875**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. Marilyn Gearhart**

Mailing Address PO Box 427

City Waterville State WA Zip Code 98858

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

Name of Employer Occupation  
None 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  
 09 / 12 / 2013  
**Transaction ID : SA11AI.95229**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. Marilyn Gearhart**

Mailing Address PO Box 427

City Waterville State WA Zip Code 98858

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

Name of Employer Occupation  
None 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  
 09 / 26 / 2013  
**Transaction ID : SA11AI.95451**

Amount of Each Receipt this Period  
250.00

**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: PAGE 11 OF 69  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**STOP HILLARY PAC**

**A. Paul Hamilton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 413 W Creek St.  
 City Fredericksburg State TX Zip Code 78624-3113  
 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 Y Y  
 10 / 04 / 2013  
**Transaction ID : SA11AI.103916**  
 Amount of Each Receipt this Period  
 250.00

**B. Eric DAVID Irwin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1314 Marquette Ave  
 City Minneapolis State MN Zip Code 55403  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 healthcare surgeon  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2013  
**Transaction ID : SA11AI.97778**  
 Amount of Each Receipt this Period  
 250.00

**C. Eric DAVID Irwin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1314 Marquette Ave  
 City Minneapolis State MN Zip Code 55403  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 healthcare surgeon  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 10 / 2013  
**Transaction ID : SA11AI.98262**  
 Amount of Each Receipt this Period  
 250.00

**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 12 OF 69
	<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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial) <b>A. Linda Kendall</b>		Date of Receipt MM / DD / YYYY 09 / 20 / 2013 <b>Transaction ID : SA11AI.103879</b>
Mailing Address 2151 Laguna St		Amount of Each Receipt this Period 1000.00
City San Francisco	State CA	Zip Code 94115
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation
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) <b>B. Jerry G Leslie</b>		Date of Receipt MM / DD / YYYY 09 / 16 / 2013 <b>Transaction ID : SA11AI.98376</b>
Mailing Address PO Box 61691		Amount of Each Receipt this Period 75.00
City Vancouver	State WA	Zip Code 98666
FEC ID number of contributing federal political committee. C	Name of Employer Self Empl	Occupation Cpa
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C. ROBERT N MATOKA</b>		Date of Receipt MM / DD / YYYY 11 / 25 / 2013 <b>Transaction ID : SA11AI.98924</b>
Mailing Address 140 PERRYVIISTA AVE		Amount of Each Receipt this Period 30.00
City PITTSBURGH	State PA	Zip Code 15237
FEC ID number of contributing federal political committee. C	Name of Employer SELF	Occupation BOOKKEEPER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1105.00
<b>TOTAL</b> 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 69
	<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)  
**STOP HILLARY PAC**

**A. Carol Matsey**  
Full Name (Last, First, Middle Initial)

Mailing Address 4801 Courthouse RD

City Chesterfield	State VA	Zip Code 23832
----------------------	-------------	-------------------

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

Name of Employer Virginia Commonwealth Univ	Occupation pharmacist
--	--------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

**Transaction ID : SA11AI.103921**

Amount of Each Receipt this Period  

100.00
--------

**B. Carol Matsey**  
Full Name (Last, First, Middle Initial)

Mailing Address 4801 Courthouse RD

City Chesterfield	State VA	Zip Code 23832
----------------------	-------------	-------------------

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

Name of Employer Virginia Commonwealth Univ	Occupation pharmacist
--	--------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2013

**Transaction ID : SA11AI.103936**

Amount of Each Receipt this Period  

50.00
-------

**C. Carol Matsey**  
Full Name (Last, First, Middle Initial)

Mailing Address 4801 Courthouse RD

City Chesterfield	State VA	Zip Code 23832
----------------------	-------------	-------------------

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

Name of Employer Virginia Commonwealth Univ	Occupation pharmacist
--	--------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **555.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	25	/	2013

**Transaction ID : SA11AI.98999**

Amount of Each Receipt this Period  

80.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>230.00</b>
<b>TOTAL</b> 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 14 OF 69  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)  
**A. Lucille Mellish**

Mailing Address 2241 Wellesley St

City Palo Alto      State CA      Zip Code 94306

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  
M M M / D D D / Y Y Y Y Y Y  
09 / 20 / 2013  
**Transaction ID : SA11AI.103878**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. Elizabeth Miller**

Mailing Address 1002 Clay St

City Hartford      State KY      Zip Code 42347

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

Name of Employer Self      Occupation Funeral Director

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 21 / 2013  
**Transaction ID : SA11AI.98844**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. Alwal Moore**

Mailing Address 9910 Page Ave

City Saint Louis      State MO      Zip Code 63132

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  
M M M / D D D / Y Y Y Y Y Y  
11 / 15 / 2013  
**Transaction ID : SA11AI.105524**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1100.00

**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 15 OF 69  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**STOP HILLARY PAC**

**A. GERALD NOSTRAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1437WYNKOOPDR  
 City COLORADO SPRINGS State CO Zip Code 80909-3245  
 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  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 02 / 2013  
**Transaction ID : SA11AI.104094**  
 Amount of Each Receipt this Period  
 500.00

**B. Duwayne Peterson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 135 3rd Ave SE  
 City Hutchinson State MN Zip Code 55350  
 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  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 17 / 2013  
**Transaction ID : SA11AI.95657**  
 Amount of Each Receipt this Period  
 500.00

**C. Richard Srednicki**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 33575 Dreamcatcher Trl  
 City Steamboat Springs State CO Zip Code 80487  
 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  
 09 / 23 / 2013  
**Transaction ID : SA11AI.95421**  
 Amount of Each Receipt this Period  
 250.00

**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 16 OF 69
	<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)  
**STOP HILLARY PAC**

**A. Sarah Stephenson**  
Full Name (Last, First, Middle Initial)

Mailing Address 114 W Lyon Farm Dr

City Greenwich State CT Zip Code 06831-0000

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 25 / 2013  
**Transaction ID : SA11AI.98964**

Amount of Each Receipt this Period  
 15.00

**B. David Tatge**  
Full Name (Last, First, Middle Initial)

Mailing Address 4591 Briney Point Road

City La Verne State CA Zip Code 91750

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

Name of Employer Self Occupation Businessman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 25 / 2013  
**Transaction ID : SA11AI.99017**

Amount of Each Receipt this Period  
 500.00

**C. Arlyn Wadholm**  
Full Name (Last, First, Middle Initial)

Mailing Address 8951 32nd St NW

City New Town State ND Zip Code 58763

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

Name of Employer Self Occupation farmer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2013  
**Transaction ID : SA11AI.98356**

Amount of Each Receipt this Period  
 75.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 590.00

**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 17 OF 69  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**STOP HILLARY PAC**

**A.** Full Name (Last, First, Middle Initial)  
Arlyn Wadholm

Mailing Address 8951 32nd St NW

City State Zip Code  
New Town ND 58763

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

Name of Employer Occupation  
Self farmer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 25 / 2013

**Transaction ID : SA11AI.98990**

Amount of Each Receipt this Period  
125.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.00
<b>TOTAL</b> This Period (last page this line number only).....▶	7095.00

**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 69
<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)  
**STOP HILLARY PAC**

**A. Jack R. Albrecht**  
Full Name (Last, First, Middle Initial)

Mailing Address 5607 Military Court

City Fairfield	State CA	Zip Code 94533
-------------------	-------------	-------------------

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

Name of Employer N/A	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
10	/	11	/	2013

**Transaction ID : SA17.101842**

Amount of Each Receipt this Period  
100.00

Contribution to Carey Account

**B. Franklin Antonio**  
Full Name (Last, First, Middle Initial)

Mailing Address 2765 Cordoba CV

City Del Mar	State CA	Zip Code 92014
-----------------	-------------	-------------------

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

Name of Employer Qualcomm	Occupation Chief Scientist
------------------------------	-------------------------------

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
07	/	22	/	2013

**Transaction ID : SA17.100058**

Amount of Each Receipt this Period  
2500.00

Contribution to Carey Account

**C. Richard Bennett**  
Full Name (Last, First, Middle Initial)

Mailing Address 1694 E. Hayden Ave.

City Hayden Lake	State ID	Zip Code 83835
---------------------	-------------	-------------------

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
09	/	19	/	2013

**Transaction ID : SA17.101486**

Amount of Each Receipt this Period  
50.00

Contribution to Carey Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2650.00
<b>TOTAL</b> 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 69
<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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial) <b>A. Andrew Burton</b>		Date of Receipt MM / DD / YYYY 08 / 28 / 2013 <b>Transaction ID : SA17.100864</b>
Mailing Address RR 2 Box 437-P		Amount of Each Receipt this Period 75.00
City Duncan	State OK	Zip Code 73533
FEC ID number of contributing federal political committee. C		Contribution to Carey Account
Name of Employer n/a	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>B. Andrew Burton</b>		Date of Receipt MM / DD / YYYY 08 / 30 / 2013 <b>Transaction ID : SA17.101129</b>
Mailing Address RR 2 Box 437-P		Amount of Each Receipt this Period 50.00
City Duncan	State OK	Zip Code 73533
FEC ID number of contributing federal political committee. C		Contribution to Carey Account
Name of Employer n/a	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Andrew Burton</b>		Date of Receipt MM / DD / YYYY 10 / 16 / 2013 <b>Transaction ID : SA17.101900</b>
Mailing Address RR 2 Box 437-P		Amount of Each Receipt this Period 25.00
City Duncan	State OK	Zip Code 73533
FEC ID number of contributing federal political committee. C		Contribution to Carey Account
Name of Employer n/a	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> 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 20 OF 69
<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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)  
**A. Andrew Burton**

Mailing Address RR 2 Box 437-P

City Duncan State OK Zip Code 73533

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

Name of Employer n/a Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 26 / 2013

**Transaction ID : SA17.102001**

Amount of Each Receipt this Period  
 100.00

Contribution to Carey Account

Full Name (Last, First, Middle Initial)  
**B. Business Management Associates**

Mailing Address 2175 Foothill Blvd. Ste B

City La Verne State CA Zip Code 91750

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  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 01 / 2013

**Transaction ID : SA17.104274**

Amount of Each Receipt this Period  
 500.00

Contribution to Carey Account

Full Name (Last, First, Middle Initial)  
**C. Robert Mitchel Comly**

Mailing Address 2 Bellwood Lane

City Castleton on Hudson State NY Zip Code 12033

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

Name of Employer retired Occupation naval engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2013

**Transaction ID : SA17.100323**

Amount of Each Receipt this Period  
 100.00

Contribution to Carey Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>700.00</b>
<b>TOTAL</b> 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 69
<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)  
**STOP HILLARY PAC**

**A. Robert Mitchel Comly**  
Full Name (Last, First, Middle Initial)

Mailing Address 2 Bellwood Lane

City Castleton on Hudson State NY Zip Code 12033

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

Name of Employer retired Occupation naval engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 30 / 2013  
**Transaction ID : SA17.101045**

Amount of Each Receipt this Period 50.00

Contribution to Carey Account

**B. Robert Mitchel Comly**  
Full Name (Last, First, Middle Initial)

Mailing Address 2 Bellwood Lane

City Castleton on Hudson State NY Zip Code 12033

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

Name of Employer retired Occupation naval engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 02 / 2013  
**Transaction ID : SA17.101605**

Amount of Each Receipt this Period 50.00

Contribution to Carey Account

**C. Robert Mitchel Comly**  
Full Name (Last, First, Middle Initial)

Mailing Address 2 Bellwood Lane

City Castleton on Hudson State NY Zip Code 12033

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

Name of Employer retired Occupation naval engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 29 / 2013  
**Transaction ID : SA17.102035**

Amount of Each Receipt this Period 100.00

Contribution to Carey Account

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 200.00

**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 69
<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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial) <b>A. Robert Mitchel Comly</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2013 <b>Transaction ID : SA17.102067</b>
Mailing Address 2 Bellwood Lane		Amount of Each Receipt this Period 100.00 Contribution to Carey Account
City Castleton on Hudson	State NY	Zip Code 12033
FEC ID number of contributing federal political committee. C		
Name of Employer retired	Occupation naval engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

Full Name (Last, First, Middle Initial) <b>B. Robert Mitchel Comly</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 30 / 2013 <b>Transaction ID : SA17.103085</b>
Mailing Address 2 Bellwood Lane		Amount of Each Receipt this Period 100.00 Contribution to Carey Account
City Castleton on Hudson	State NY	Zip Code 12033
FEC ID number of contributing federal political committee. C		
Name of Employer retired	Occupation naval engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

Full Name (Last, First, Middle Initial) <b>C. Thomas Corr</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 27 / 2013 <b>Transaction ID : SA17.100756</b>
Mailing Address 3001 ocean dr		Amount of Each Receipt this Period 250.00 Contribution to Carey Account
City Vero Beach	State FL	Zip Code 32963
FEC ID number of contributing federal political committee. C		
Name of Employer GE Warren corp	Occupation oil business	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> 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 23 OF 69
<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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial) <b>A. Marilyn Cosentino</b>		Date of Receipt
Mailing Address 1338 Sanchez Street		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code
San Francisco	CA	94131
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.102173</b>
Name of Employer retired		Amount of Each Receipt this Period
Occupation retired		<input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Contribution to Carey Account
Aggregate Year-to-Date ▼		<input type="text" value="250.00"/>

Full Name (Last, First, Middle Initial) <b>B. Mae Dawson</b>		Date of Receipt
Mailing Address P.O. Box 157		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code
Fulton	TX	78358
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.103179</b>
Name of Employer The Bag Lady		Amount of Each Receipt this Period
Occupation Gerbage service		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Contribution to Carey Account
Aggregate Year-to-Date ▼		<input type="text" value="280.00"/>

Full Name (Last, First, Middle Initial) <b>C. Mae Dawson</b>		Date of Receipt
Mailing Address P.O. Box 157		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code
Fulton	TX	78358
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.103223</b>
Name of Employer The Bag Lady		Amount of Each Receipt this Period
Occupation Gerbage service		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Contribution to Carey Account
Aggregate Year-to-Date ▼		<input type="text" value="305.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="300.00"/>
<b>TOTAL</b> 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: (check only one)	PAGE 24 OF 69
<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)  
**STOP HILLARY PAC**

**A. Joyce Dill**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3725 West Center St  
City Cincinnati State OH Zip Code 45227  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **300.00**

Date of Receipt **10 / 30 / 2013**  
**Transaction ID : SA17.102045**  
Amount of Each Receipt this Period **100.00**  
Contribution to Carey Account

**B. Joyce Dill**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3725 West Center St  
City Cincinnati State OH Zip Code 45227  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **400.00**

Date of Receipt **11 / 23 / 2013**  
**Transaction ID : SA17.102887**  
Amount of Each Receipt this Period **100.00**  
Contribution to Carey Account

**C. eDonation**  
Full Name (Last, First, Middle Initial)  
Mailing Address 117 North Saint Asaph Street  
City Alexandra State VA Zip Code 22314  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **4062.66**

Date of Receipt **10 / 11 / 2013**  
**Transaction ID : SA17.104280**  
Amount of Each Receipt this Period **4062.66**  
Contribution to Carey Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>4262.66</b>
<b>TOTAL</b> 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 69
<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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial) <b>A. eDonation</b>		Date of Receipt
Mailing Address 117 North Saint Asaph Street		<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code
Alexandra	VA	22314
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.104281</b>
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="1232.26"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Contribution to Carey Account
Aggregate Year-to-Date ▼		
<input type="text" value="5294.92"/>		

Full Name (Last, First, Middle Initial) <b>B. Daniel Finley</b>		Date of Receipt
Mailing Address p o box 27535		<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code
Houston	TX	77227
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.101464</b>
Name of Employer self		Amount of Each Receipt this Period
Occupation attorney		<input type="text" value="500.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Contribution to Carey Account
Aggregate Year-to-Date ▼		
<input type="text" value="500.00"/>		

Full Name (Last, First, Middle Initial) <b>C. Walter Gerhardt</b>		Date of Receipt
Mailing Address 9503 GUFSTREAM RD		<input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City	State	Zip Code
Frankfort	IL	60423
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.103767</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Contribution to Carey Account
Aggregate Year-to-Date ▼		
<input type="text" value="225.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1782.26"/>
<b>TOTAL</b> 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: (check only one)	PAGE 26 OF 69
<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)  
**STOP HILLARY PAC**

**A. Dennis Gilstad**  
Full Name (Last, First, Middle Initial)

Mailing Address 7255 East Baldwin Road

City Grand Blanc State MI Zip Code 48439

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  
 07 / 24 / 2013

**Transaction ID : SA17.100090**

Amount of Each Receipt this Period  
 250.00

Contribution to Carey Account

**B. Dennis Gilstad**  
Full Name (Last, First, Middle Initial)

Mailing Address 7255 East Baldwin Road

City Grand Blanc State MI Zip Code 48439

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 ▼ 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 05 / 2013

**Transaction ID : SA17.102180**

Amount of Each Receipt this Period  
 500.00

Contribution to Carey Account

**C. paul griffin**  
Full Name (Last, First, Middle Initial)

Mailing Address 1323 trailhead court

City greenville State SC Zip Code 29617

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

Name of Employer retired Occupation physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 05 / 2013

**Transaction ID : SA17.102101**

Amount of Each Receipt this Period  
 25.00

Contribution to Carey Account

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 775.00

**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 27 OF 69
	<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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial) <b>A. paul griffin</b>		Date of Receipt MM / DD / YYYY 12 / 05 / 2013 <b>Transaction ID : SA17.103171</b>
Mailing Address 1323 trailhead court		Amount of Each Receipt this Period 250.00
City greenville	State SC	Zip Code 29617
FEC ID number of contributing federal political committee. C		Contribution to Carey Account
Name of Employer retired	Occupation physician	
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>B. Grow Your Campaign, LLC</b>		Date of Receipt MM / DD / YYYY 11 / 13 / 2013 <b>Transaction ID : SA17.104284</b>
Mailing Address PO Box 17253		Amount of Each Receipt this Period 612.41
City Arlington	State VA	Zip Code 22216
FEC ID number of contributing federal political committee. C		Contribution to Carey Account
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 612.41	

Full Name (Last, First, Middle Initial) <b>C. Max Gurth</b>		Date of Receipt MM / DD / YYYY 07 / 12 / 2013 <b>Transaction ID : SA17.99559</b>
Mailing Address 1781 carob tree lane		Amount of Each Receipt this Period 500.00
City ElCajon	State CA	Zip Code 92021
FEC ID number of contributing federal political committee. C		Contribution to Carey Account
Name of Employer Discflo Corp	Occupation President CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1137.41
<b>TOTAL</b> 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 69
<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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial) <b>A. Tatnall Hillman</b>		Date of Receipt MM / DD / YYYY 07 / 11 / 2013 <b>Transaction ID : SA17.99216</b>
Mailing Address 504 W Bleeker St		Amount of Each Receipt this Period 1000.00
City Aspen	State CO	Zip Code 81611
FEC ID number of contributing federal political committee. C	Contribution to Carey Account	
Name of Employer Self	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) <b>B. Tatnall Hillman</b>		Date of Receipt MM / DD / YYYY 09 / 10 / 2013 <b>Transaction ID : SA17.101401</b>
Mailing Address 504 W Bleeker St		Amount of Each Receipt this Period 25.00
City Aspen	State CO	Zip Code 81611
FEC ID number of contributing federal political committee. C	Contribution to Carey Account	
Name of Employer Self	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1025.00	

Full Name (Last, First, Middle Initial) <b>C. Tatnall Hillman</b>		Date of Receipt MM / DD / YYYY 10 / 23 / 2013 <b>Transaction ID : SA17.101950</b>
Mailing Address 504 W Bleeker St		Amount of Each Receipt this Period 100.00
City Aspen	State CO	Zip Code 81611
FEC ID number of contributing federal political committee. C	Contribution to Carey Account	
Name of Employer Self	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1125.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1125.00
<b>TOTAL</b> 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 29 OF 69
<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)  
**STOP HILLARY PAC**

**A. Tatnall Hillman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 504 W Bleeker St  
City Aspen State CO Zip Code 81611  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Retired  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **1225.00**

Date of Receipt **12 / 05 / 2013**  
**Transaction ID : SA17.103225**  
Amount of Each Receipt this Period **100.00**  
Contribution to Carey Account

**B. Novieda Johnson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 14428 S. Brent Dr  
City El Reno State OK Zip Code 73036  
FEC ID number of contributing federal political committee. **C**  
Name of Employer none Occupation retired  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **250.00**

Date of Receipt **10 / 05 / 2013**  
**Transaction ID : SA17.101648**  
Amount of Each Receipt this Period **50.00**  
Contribution to Carey Account

**C. Edwin Jordan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4301 Westside Dr #100  
City Dallas State TX Zip Code 75209  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Intercity Investments, Inc Occupation Real Estate  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **225.00**

Date of Receipt **10 / 05 / 2013**  
**Transaction ID : SA17.101693**  
Amount of Each Receipt this Period **50.00**  
Contribution to Carey Account

**SUBTOTAL** of Receipts This Page (optional)..... **200.00**  
**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 30 OF 69
<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)  
**STOP HILLARY PAC**

**A. Edwin Jordan**  
Full Name (Last, First, Middle Initial)

Mailing Address 4301 Westside Dr #100  
City Dallas State TX Zip Code 75209

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

Name of Employer Intercity Investments, Inc Occupation Real Estate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **10 / 10 / 2013**  
**Transaction ID : SA17.101803**

Amount of Each Receipt this Period **50.00**

Contribution to Carey Account

**B. Edwin Jordan**  
Full Name (Last, First, Middle Initial)

Mailing Address 4301 Westside Dr #100  
City Dallas State TX Zip Code 75209

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

Name of Employer Intercity Investments, Inc Occupation Real Estate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **10 / 29 / 2013**  
**Transaction ID : SA17.102027**

Amount of Each Receipt this Period **25.00**

Contribution to Carey Account

**C. Edwin Jordan**  
Full Name (Last, First, Middle Initial)

Mailing Address 4301 Westside Dr #100  
City Dallas State TX Zip Code 75209

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

Name of Employer Intercity Investments, Inc Occupation Real Estate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **11 / 05 / 2013**  
**Transaction ID : SA17.102144**

Amount of Each Receipt this Period **50.00**

Contribution to Carey Account

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **125.00**

**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 31 OF 69  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)  
**A. Edwin Jordan**

Mailing Address 4301 Westside Dr  
#100

City Dallas State TX Zip Code 75209

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

Name of Employer Intercity Investments, Inc Occupation Real Estate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 11 / 06 / 2013  
**Transaction ID : SA17.102215**

Amount of Each Receipt this Period  
25.00

Contribution to Carey Account

Full Name (Last, First, Middle Initial)  
**B. Edwin Jordan**

Mailing Address 4301 Westside Dr  
#100

City Dallas State TX Zip Code 75209

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

Name of Employer Intercity Investments, Inc Occupation Real Estate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 11 / 12 / 2013  
**Transaction ID : SA17.102328**

Amount of Each Receipt this Period  
25.00

Contribution to Carey Account

Full Name (Last, First, Middle Initial)  
**C. Edwin Jordan**

Mailing Address 4301 Westside Dr  
#100

City Dallas State TX Zip Code 75209

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

Name of Employer Intercity Investments, Inc Occupation Real Estate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 12 / 05 / 2013  
**Transaction ID : SA17.103206**

Amount of Each Receipt this Period  
50.00

Contribution to Carey Account

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 100.00

**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 32 OF 69  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)  
**A. Carolyn Kenney**

Mailing Address 201 Barberry Dr

City Benson State NC Zip Code 27504

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

Name of Employer Mohawk Ind Occupation warehouse

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 20 / 2013  
**Transaction ID : SA17.102864**

Amount of Each Receipt this Period  
10.00

Contribution to Carey Account

Full Name (Last, First, Middle Initial)  
**B. Carolyn Kenney**

Mailing Address 201 Barberry Dr

City Benson State NC Zip Code 27504

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

Name of Employer Mohawk Ind Occupation warehouse

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 23 / 2013  
**Transaction ID : SA17.102902**

Amount of Each Receipt this Period  
10.00

Contribution to Carey Account

Full Name (Last, First, Middle Initial)  
**C. Carolyn Kenney**

Mailing Address 201 Barberry Dr

City Benson State NC Zip Code 27504

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

Name of Employer Mohawk Ind Occupation warehouse

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 04 / 2013  
**Transaction ID : SA17.103157**

Amount of Each Receipt this Period  
10.00

Contribution to Carey Account

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30.00

**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 69
<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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial) <b>A. Carolyn Kenney</b>		Date of Receipt
Mailing Address 201 Barberry Dr		<input type="text" value="12"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City Benson	State NC	Zip Code 27504
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.103250</b>
Name of Employer: Mohawk Ind		Occupation: warehouse
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period: <input type="text" value="10.00"/>
Aggregate Year-to-Date ▼: <input type="text" value="235.00"/>		Contribution to Carey Account

Full Name (Last, First, Middle Initial) <b>B. Carolyn Kenney</b>		Date of Receipt
Mailing Address 201 Barberry Dr		<input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City Benson	State NC	Zip Code 27504
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.103586</b>
Name of Employer: Mohawk Ind		Occupation: warehouse
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period: <input type="text" value="25.00"/>
Aggregate Year-to-Date ▼: <input type="text" value="260.00"/>		Contribution to Carey Account

Full Name (Last, First, Middle Initial) <b>C. Carolyn Kenney</b>		Date of Receipt
Mailing Address 201 Barberry Dr		<input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City Benson	State NC	Zip Code 27504
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.103657</b>
Name of Employer: Mohawk Ind		Occupation: warehouse
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period: <input type="text" value="10.00"/>
Aggregate Year-to-Date ▼: <input type="text" value="270.00"/>		Contribution to Carey Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="45.00"/>
<b>TOTAL</b> 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: (check only one)	PAGE 34 OF 69
<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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial) <b>A. nadine leyton</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 16 / 2013 <b>Transaction ID : SA17.102728</b>
Mailing Address 1150 polaris dr		Amount of Each Receipt this Period 100.00
City newport beach	State CA	Zip Code 92660
FEC ID number of contributing federal political committee. C		Contribution to Carey Account
Name of Employer retired	Occupation homemaker	
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>B. lorraine lovelace</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 23 / 2013 <b>Transaction ID : SA17.102921</b>
Mailing Address 4974 rio verde dr		Amount of Each Receipt this Period 50.00
City san jose	State CA	Zip Code 95118
FEC ID number of contributing federal political committee. C		Contribution to Carey Account
Name of Employer social services	Occupation provider	
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>C. lorraine lovelace</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2013 <b>Transaction ID : SA17.103066</b>
Mailing Address 4974 rio verde dr		Amount of Each Receipt this Period 50.00
City san jose	State CA	Zip Code 95118
FEC ID number of contributing federal political committee. C		Contribution to Carey Account
Name of Employer social services	Occupation provider	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> 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 35 OF 69
<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)  
**STOP HILLARY PAC**

**A. Iorraine lovelace**  
Full Name (Last, First, Middle Initial)

Mailing Address 4974 rio verde dr

City san jose State CA Zip Code 95118

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

Name of Employer social services Occupation provider

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : SA17.103186**

Amount of Each Receipt this Period  
**25.00**

Contribution to Carey Account

**B. L. A. Marsha, Jr.**  
Full Name (Last, First, Middle Initial)

Mailing Address 5655 Pinebranch Rd.

City Columbia State SC Zip Code 29206

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

Name of Employer L. A. Marsha Company, Inc. Occupation Wholesale/Export- Textiles

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  
 12 / 05 / 2013

**Transaction ID : SA17.103180**

Amount of Each Receipt this Period  
**100.00**

Contribution to Carey Account

**C. ROBERT N MATOKA**  
Full Name (Last, First, Middle Initial)

Mailing Address 140 PERRYVIISTA AVE

City PITTSBURGH State PA Zip Code 15237

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

Name of Employer SELF Occupation BOOKKEEPER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 25 / 2013

**Transaction ID : SA17.103006**

Amount of Each Receipt this Period  
**50.00**

Contribution to Carey Account

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **175.00**

**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 36 OF 69
<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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial) <b>A. Carol Matsey</b>		Date of Receipt MM / DD / YYYY 09 / 05 / 2013 <b>Transaction ID : SA17.101296</b>
Mailing Address 4801 Courthouse RD		Amount of Each Receipt this Period 50.00
City Chesterfield	State VA	Zip Code 23832
FEC ID number of contributing federal political committee. C	Contribution to Carey Account	
Name of Employer Virginia Commonwealth Univ	Occupation pharmacist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B. Carol Matsey</b>		Date of Receipt MM / DD / YYYY 10 / 05 / 2013 <b>Transaction ID : SA17.101633</b>
Mailing Address 4801 Courthouse RD		Amount of Each Receipt this Period 50.00
City Chesterfield	State VA	Zip Code 23832
FEC ID number of contributing federal political committee. C	Contribution to Carey Account	
Name of Employer Virginia Commonwealth Univ	Occupation pharmacist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Full Name (Last, First, Middle Initial) <b>C. Carol Matsey</b>		Date of Receipt MM / DD / YYYY 11 / 05 / 2013 <b>Transaction ID : SA17.102090</b>
Mailing Address 4801 Courthouse RD		Amount of Each Receipt this Period 50.00
City Chesterfield	State VA	Zip Code 23832
FEC ID number of contributing federal political committee. C	Contribution to Carey Account	
Name of Employer Virginia Commonwealth Univ	Occupation pharmacist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> 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 37 OF 69
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input checked="" 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)  
**STOP HILLARY PAC**

**A. Carol Matsey**  
Full Name (Last, First, Middle Initial)

Mailing Address 4801 Courthouse RD

City Chesterfield State VA Zip Code 23832

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

Name of Employer Virginia Commonwealth Univ Occupation pharmacist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **605.00**

Date of Receipt **12 / 05 / 2013**

**Transaction ID : SA17.103168**

Amount of Each Receipt this Period **50.00**

Contribution to Carey Account

**B. Michael Miller**  
Full Name (Last, First, Middle Initial)

Mailing Address 123 WEST MAIN ST

City Barrington State IL Zip Code 60010

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

Name of Employer SELF Occupation JEWELER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **08 / 31 / 2013**

**Transaction ID : SA17.101174**

Amount of Each Receipt this Period **50.00**

Contribution to Carey Account

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

Mailing Address 123 WEST MAIN ST

City Barrington State IL Zip Code 60010

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

Name of Employer SELF Occupation JEWELER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **09 / 24 / 2013**

**Transaction ID : SA17.101510**

Amount of Each Receipt this Period **100.00**

Contribution to Carey Account

**SUBTOTAL** of Receipts This Page (optional)..... **200.00**

**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 38 OF 69
<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)  
**STOP HILLARY PAC**

**A. R. E. Miller**  
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 157

City Cranfills Gap State TX Zip Code 76637

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

Name of Employer None 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  
 07 / 23 / 2013

**Transaction ID : SA17.100078**

Amount of Each Receipt this Period  
 250.00

Contribution to Carey Account

**B. B.B. Munford III**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O.Box 85678

City Richmond State VA Zip Code 23285

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

Name of Employer Davenport & Co. Occupation Stock Broker

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  
 08 / 15 / 2013

**Transaction ID : SA17.100490**

Amount of Each Receipt this Period  
 50.00

Contribution to Carey Account

**C. Barbara Neurohr**  
Full Name (Last, First, Middle Initial)

Mailing Address 11350 Woodstock Rd.  
Apt. 1355

City Roswell State GA Zip Code 30075

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

Name of Employer Self Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 07 / 2013

**Transaction ID : SA17.103256**

Amount of Each Receipt this Period  
 25.00

Contribution to Carey Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	325.00
<b>TOTAL</b> 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 39 OF 69
<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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)  
**A. donald olivie**

Mailing Address 17 landmark ln.

City bluffton State SC Zip Code 29909

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

Name of Employer none Occupation retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 09 / 2013

**Transaction ID : SA17.101742**

Amount of Each Receipt this Period  
25.00

Contribution to Carey Account

Full Name (Last, First, Middle Initial)  
**B. Walter Ouradnik**

Mailing Address 428 th St. N.  
p.o. bOX 355

City New Town State ND Zip Code 58763

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  
 07 / 30 / 2013

**Transaction ID : SA17.100223**

Amount of Each Receipt this Period  
100.00

Contribution to Carey Account

Full Name (Last, First, Middle Initial)  
**C. Doris Pinsley**

Mailing Address 17 harbor drive

City Rumson State NJ Zip Code 07760-0000

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 ▼  
205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : SA17.103185**

Amount of Each Receipt this Period  
10.00

Contribution to Carey Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	135.00
<b>TOTAL</b> 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 40 OF 69
<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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial) <b>A. Doris Pinsley</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 21 / 2013 <b>Transaction ID : SA17.103425</b>
Mailing Address 17 harbor drive		Amount of Each Receipt this Period 25.00
City Rumson	State NJ	Zip Code 07760-0000
FEC ID number of contributing federal political committee. <b>C</b>		Contribution to Carey Account
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 ▼ 230.00	

Full Name (Last, First, Middle Initial) <b>B. Lenora H Pusta</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 05 / 2013 <b>Transaction ID : SA17.101624</b>
Mailing Address 138 W. Sunflower Drive		Amount of Each Receipt this Period 100.00
City Payson	State AZ	Zip Code 85541
FEC ID number of contributing federal political committee. <b>C</b>		Contribution to Carey Account
Name of Employer Euclid, OH Bd of Education	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Lenora H Pusta</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 05 / 2013 <b>Transaction ID : SA17.102082</b>
Mailing Address 138 W. Sunflower Drive		Amount of Each Receipt this Period 100.00
City Payson	State AZ	Zip Code 85541
FEC ID number of contributing federal political committee. <b>C</b>		Contribution to Carey Account
Name of Employer Euclid, OH Bd of Education	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225.00
<b>TOTAL</b> 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 41 OF 69
<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)  
**STOP HILLARY PAC**

**A. Lenora H Pusta**  
Full Name (Last, First, Middle Initial)  
Mailing Address 138 W. Sunflower Drive

City Payson	State AZ	Zip Code 85541
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FEC ID number of contributing federal political committee. **C**

Name of Employer Euclid, OH Bd of Education	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
12	/	05	/	2013

**Transaction ID : SA17.103164**

Amount of Each Receipt this Period  
100.00

Contribution to Carey Account

**B. Carmelo Sckittone**  
Full Name (Last, First, Middle Initial)  
Mailing Address 625 Ave L

City Dickinson	State TX	Zip Code 75539
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FEC ID number of contributing federal political committee. **C**

Name of Employer Styrolution	Occupation Operator
---------------------------------	------------------------

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
11	/	23	/	2013

**Transaction ID : SA17.102892**

Amount of Each Receipt this Period  
100.00

Contribution to Carey Account

**C. CHARLES SHOCKLEY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1493 E. SAN BERNARDINO AVE

City SAN BERNARDINO	State CA	Zip Code 92408
------------------------	-------------	-------------------

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

Name of Employer CONTAINER OPTIONS INC	Occupation GM
---	------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2013

**Transaction ID : SA17.101451**

Amount of Each Receipt this Period  
50.00

Contribution to Carey Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> 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 42 OF 69
<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)  
**STOP HILLARY PAC**

**A. William Stewart**  
Full Name (Last, First, Middle Initial)

Mailing Address Box 159

City Stevenson State MD Zip Code 21153

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

Name of Employer Asset Strategy Consultants Occupation Investment consulting

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **07 / 30 / 2013**

**Transaction ID : SA17.100253**

Amount of Each Receipt this Period **250.00**

Contribution to Carey Account

**B. Rozene Supple**  
Full Name (Last, First, Middle Initial)

Mailing Address 1850 Smoke Tree Ln

City Palm Spring State CA Zip Code 92264-1602

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

Name of Employer Self Occupation Radio

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **10 / 04 / 2013**

**Transaction ID : SA17.104275**

Amount of Each Receipt this Period **250.00**

Contribution to Carey Account

**C. Nancy Sweatt**  
Full Name (Last, First, Middle Initial)

Mailing Address p o box 3087

City santa cruz State CA Zip Code 95063

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

Name of Employer self Occupation ret atty

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **10 / 30 / 2013**

**Transaction ID : SA17.102048**

Amount of Each Receipt this Period **50.00**

Contribution to Carey Account

**SUBTOTAL** of Receipts This Page (optional)..... **550.00**

**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 43 OF 69
<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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial) <b>A. Marion Taylor</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 18 / 2013 <b>Transaction ID : SA17.103327</b>
Mailing Address 502 Mockingbird Lane P.O. Box 42		Amount of Each Receipt this Period 25.00
City Devine State TX Zip Code 78016	FEC ID number of contributing federal political committee. C	Contribution to Carey Account
Name of Employer City of Devine, Tx. Occupation Municipal Judge	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00

Full Name (Last, First, Middle Initial) <b>B. Randall Thompson, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2013 <b>Transaction ID : SA17.102246</b>
Mailing Address 34 Bedford Road		Amount of Each Receipt this Period 50.00
City Lincoln State MA Zip Code 01773-0000	FEC ID number of contributing federal political committee. C	Contribution to Carey Account
Name of Employer Self Occupation Architect (Retired)	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00

Full Name (Last, First, Middle Initial) <b>C. Randall Thompson, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 05 / 2013 <b>Transaction ID : SA17.103178</b>
Mailing Address 34 Bedford Road		Amount of Each Receipt this Period 10.00
City Lincoln State MA Zip Code 01773-0000	FEC ID number of contributing federal political committee. C	Contribution to Carey Account
Name of Employer Self Occupation Architect (Retired)	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	85.00
<b>TOTAL</b> 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 44 OF 69
<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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial) <b>A. Lori Thompson</b>		Date of Receipt MM / DD / YYYY 08 / 30 / 2013 <b>Transaction ID : SA17.101082</b>
Mailing Address 602 N Guadalupe Ave Unit B		Amount of Each Receipt this Period 250.00
City Redondo Beach	State CA	Zip Code 90277
FEC ID number of contributing federal political committee. C		Contribution to Carey Account
Name of Employer Reedex, Inc.	Occupation Accounting Manager	
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>B. Lori Thompson</b>		Date of Receipt MM / DD / YYYY 10 / 26 / 2013 <b>Transaction ID : SA17.102005</b>
Mailing Address 602 N Guadalupe Ave Unit B		Amount of Each Receipt this Period 100.00
City Redondo Beach	State CA	Zip Code 90277
FEC ID number of contributing federal political committee. C		Contribution to Carey Account
Name of Employer Reedex, Inc.	Occupation Accounting Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C. BOB TOWNE</b>		Date of Receipt MM / DD / YYYY 09 / 17 / 2013 <b>Transaction ID : SA17.101452</b>
Mailing Address 91-1156 Paapaana St		Amount of Each Receipt this Period 100.00
City Ewa Beach	State HI	Zip Code 96706
FEC ID number of contributing federal political committee. C		Contribution to Carey Account
Name of Employer n/a	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> 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 45 OF 69
<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)  
**STOP HILLARY PAC**

**A. ROBERT WEIGLE**  
Full Name (Last, First, Middle Initial)

Mailing Address 1001 FANNIN ST.  
SUITE 722

City HOUSTON State TX Zip Code 77002

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

Name of Employer DAVID C. BINTLIFF & CO., INC, Occupation CO PRESIDENT, CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 12 / 05 / 2013  
**Transaction ID : SA17.103184**

Amount of Each Receipt this Period 100.00

Contribution to Carey Account

**B. ROBERT WEIGLE**  
Full Name (Last, First, Middle Initial)

Mailing Address 1001 FANNIN ST.  
SUITE 722

City HOUSTON State TX Zip Code 77002

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

Name of Employer DAVID C. BINTLIFF & CO., INC, Occupation CO PRESIDENT, CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 31 / 2013  
**Transaction ID : SA17.103798**

Amount of Each Receipt this Period 25.00

Contribution to Carey Account

**c. Charles Zeiser**  
Full Name (Last, First, Middle Initial)

Mailing Address 510 Rolling Way

City Signal Mountain State TN Zip Code 37377

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

Name of Employer Southern Champion Tray Occupation Ch'm of the Board

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 09 / 2013  
**Transaction ID : SA17.101788**

Amount of Each Receipt this Period 250.00

Contribution to Carey Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	285.00
<b>TOTAL</b> 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 46 OF 69
<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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial) <b>A. Charles Zeiser</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 15 / 2013
Mailing Address 510 Rolling Way		<b>Transaction ID : SA17.101857</b>
City Signal Mountain	State TN	Zip Code 37377
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00	
Name of Employer Southern Champion Tray	Occupation Ch'm of the Board	Contribution to Carey Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) <b>B. Larry Ziegler</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 15 / 2013
Mailing Address 202 Elm Ave		<b>Transaction ID : SA17.101876</b>
City Castle Rock	State CO	Zip Code 80104
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Mt Zion Lutheran Church	Occupation Pastor	Contribution to Carey Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1030.00	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1025.00
<b>TOTAL</b> This Period (last page this line number only).....▶	18087.33

**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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)

**A. Allegiance List Marketing**

Mailing Address 202 Church St. SE Suite 100

City Leesburg State VA Zip Code 20175-3006

Purpose of Disbursement  
Direct mail vendor costs

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 09 / 2013

Transaction ID : SB21B.5640

Amount of Each Disbursement this Period

637.50

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address P.O. Box 981540

City El Paso State TX Zip Code 79998

Purpose of Disbursement  
Merchant processing fee

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 18 / 2013

Transaction ID : SB21B.5609

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address P.O. Box 981540

City El Paso State TX Zip Code 79998

Purpose of Disbursement  
Merchant processing fee

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 22 / 2013

Transaction ID : SB21B.5610

Amount of Each Disbursement this Period

19.01

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

664.46

**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 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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement MM / DD / YYYY 11 / 19 / 2013
Mailing Address P.O. Box 981540		<b>Transaction ID : SB21B.5614</b>
City El Paso	State TX	
Purpose of Disbursement Merchant processing fee	Candidate Name	Amount of Each Disbursement this Period 7.95
Category/Type 003		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Date of Disbursement MM / DD / YYYY 11 / 22 / 2013
Mailing Address P.O. Box 981540		<b>Transaction ID : SB21B.5615</b>
City El Paso	State TX	
Purpose of Disbursement Merchant processing fee	Candidate Name	Amount of Each Disbursement this Period 23.40
Category/Type 003		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Express</b>		Date of Disbursement MM / DD / YYYY 12 / 18 / 2013
Mailing Address P.O. Box 981540		<b>Transaction ID : SB21B.5620</b>
City El Paso	State TX	
Purpose of Disbursement Merchant processing fee	Candidate Name	Amount of Each Disbursement this Period 7.95
Category/Type 003		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	39.30
<b>TOTAL</b> 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 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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O. Box 981540

City El Paso State TX Zip Code 79998

Purpose of Disbursement  
Merchant processing fee

003

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 23 / 2013

Transaction ID : SB21B.5621

Amount of Each Disbursement this Period

27.19

Full Name (Last, First, Middle Initial)

**B. DB Capitol Strategies**

Mailing Address 203 S. Union St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Legal and compliance consulting

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 02 / 2013

Transaction ID : SB21B.5624

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Elavon Inc.**

Mailing Address Two Concourse Parkway  
Suite 800

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
Merchant processing fee

003

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2013

Transaction ID : SB21B.5596

Amount of Each Disbursement this Period

818.89

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

1846.08

**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 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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)

**A. Elavon Inc.**

Mailing Address Two Concourse Parkway  
Suite 800

City Atlanta State GA Zip Code 30328

Purpose of Disbursement Refund FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 29 / 2013

Transaction ID : **SB21B.5597**

Amount of Each Disbursement this Period: 25.00

Category/Type: 003

Full Name (Last, First, Middle Initial)

**B. Elavon Inc.**

Mailing Address Two Concourse Parkway  
Suite 800

City Atlanta State GA Zip Code 30328

Purpose of Disbursement Merchant processing fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 02 / 2013

Transaction ID : **SB21B.5598**

Amount of Each Disbursement this Period: 513.84

Category/Type: 003

Full Name (Last, First, Middle Initial)

**C. Elavon Inc.**

Mailing Address Two Concourse Parkway  
Suite 800

City Atlanta State GA Zip Code 30328

Purpose of Disbursement Merchant processing fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 15 / 2013

Transaction ID : **SB21B.5599**

Amount of Each Disbursement this Period: 75.00

Category/Type: 003

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 613.84

**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 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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)

**A. Elavon Inc.**

Mailing Address Two Concourse Parkway  
Suite 800

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
Merchant processing fee

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.5602**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Elavon Inc.**

Mailing Address Two Concourse Parkway  
Suite 800

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
Merchant processing fee

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.5604**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Elavon Inc.**

Mailing Address Two Concourse Parkway  
Suite 800

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
Merchant processing fee

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.5605**

Amount of Each Disbursement this Period

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

**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 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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)

**A. Elavon Inc.**

Mailing Address Two Concourse Parkway  
Suite 800

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
Merchant processing fee

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 02 / 2013

Transaction ID : **SB21B.5608**

Amount of Each Disbursement this Period

213.18

Full Name (Last, First, Middle Initial)

**B. Elavon Inc.**

Mailing Address Two Concourse Parkway  
Suite 800

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
Merchant processing fee

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 04 / 2013

Transaction ID : **SB21B.5611**

Amount of Each Disbursement this Period

158.44

Full Name (Last, First, Middle Initial)

**C. Elavon Inc.**

Mailing Address Two Concourse Parkway  
Suite 800

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
Refund FEE

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 21 / 2013

Transaction ID : **SB21B.5617**

Amount of Each Disbursement this Period

25.00

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

396.62

**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 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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)

**A. Elavon Inc.**

Mailing Address Two Concourse Parkway  
Suite 800

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
Merchant processing fee

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	9		2	0	1	3

Transaction ID : SB21B.5616

Amount of Each Disbursement this Period

2	0	.	0	0
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Elavon Inc.**

Mailing Address Two Concourse Parkway  
Suite 800

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
Merchant processing fee

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB21B.5618

Amount of Each Disbursement this Period

4	4	2	.	4	5
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. MDI Imaging & Mail**

Mailing Address 21955 Cascades Parkway

City Dulles State VA Zip Code 20166-9211

Purpose of Disbursement  
Direct mail vendor costs

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	1	3

Transaction ID : SB21B.5644

Amount of Each Disbursement this Period

4	8	3	.	9	8
---	---	---	---	---	---

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

5	3	0	1	.	9	8
---	---	---	---	---	---	---

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

5	3	0	1	.	9	8
---	---	---	---	---	---	---

**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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)

**A. PCI Payment Solutions**

Mailing Address 902 Chinquapin Rd

City McLean State VA Zip Code 22102

Purpose of Disbursement Misc. Merchant Processing Fees and Unitemized Refund Adjustment

003

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2013

Transaction ID : SB21B.105528

Amount of Each Disbursement this Period

810.00

Full Name (Last, First, Middle Initial)

**B. SCM Enterprises**

Mailing Address 203 S. Union St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement list rental fee

004

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 03 / 2013

Transaction ID : SB21B.5648

Amount of Each Disbursement this Period

202.14

Full Name (Last, First, Middle Initial)

**C. Singularis Group**

Mailing Address 6750 Antioch Rd Ste 307

City Shawnee Mission State KS Zip Code 66201

Purpose of Disbursement Direct mail vendor costs

003

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 09 / 2013

Transaction ID : SB21B.5642

Amount of Each Disbursement this Period

400.00

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

1412.14

**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 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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)

**A. Strategic Fundraising Inc.**

Mailing Address 7800 3rd Street, North  
Suite 900

City St. Paul State MN Zip Code 55128

Purpose of Disbursement  
Fundraising consulting and processing

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**003**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.5636**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Strategic Fundraising Inc.**

Mailing Address 7800 3rd Street, North  
Suite 900

City St. Paul State MN Zip Code 55128

Purpose of Disbursement  
Fundraising consulting and processing

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**003**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.5637**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Strategic Fundraising Inc.**

Mailing Address 7800 3rd Street, North  
Suite 900

City St. Paul State MN Zip Code 55128

Purpose of Disbursement  
Fundraising consulting and processing

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**003**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.5645**

Amount of Each Disbursement this Period

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

**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 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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)

**A. Strategic Fundraising Inc.**

Mailing Address 7800 3rd Street, North  
Suite 900

City St. Paul State MN Zip Code 55128

Purpose of Disbursement  
Fundraising consulting and processing

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**003**  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 02 / 2013

**Transaction ID : SB21B.5646**

Amount of Each Disbursement this Period

12847.42

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)..... ▶

12847.42

121208.88



**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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)

**A. Big Eye Direct**

Mailing Address 13860 Redskin Dr

City Herndon State VA Zip Code 20171

Purpose of Disbursement  
Direct mail vendor costs

003

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 07 / 2013

Transaction ID : SB29.5661

Amount of Each Disbursement this Period

15185.34

Full Name (Last, First, Middle Initial)

**B. Campaign Solutions**

Mailing Address 117 N St Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Digital services invoice (withheld) #12056

004

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SB29.5672

Amount of Each Disbursement this Period

757.10

Full Name (Last, First, Middle Initial)

**C. Campaign Solutions**

Mailing Address 117 N St Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Digital services invoice (withheld) #4307

004

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 05 / 2013

Transaction ID : SB29.5673

Amount of Each Disbursement this Period

661.08

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

16603.52

**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 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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)

**A. Campaign Solutions**

Mailing Address 117 N St Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Digital services invoice (withheld) #4307

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**004**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.5674**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Campaign Solutions**

Mailing Address 117 N St Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Digital services invoice (withheld) #12182

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**004**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.5675**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Campaign Solutions**

Mailing Address 117 N St Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Digital services invoice (withheld) #12182

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**004**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.5676**

Amount of Each Disbursement this Period

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

**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 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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)

**A. Campaign Solutions**

Mailing Address 117 N St Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Digital services invoice (withheld) #4320

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**004**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.5677**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Campaign Solutions**

Mailing Address 117 N St Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Digital services invoice (withheld) #12269

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**004**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.5678**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Campaign Solutions**

Mailing Address 117 N St Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Digital services invoice (withheld) #12257

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**004**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.5679**

Amount of Each Disbursement this Period

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

**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 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)  
**STOP HILLARY PAC**

**A. Campaign Solutions**

Full Name (Last, First, Middle Initial)

Mailing Address 117 N St Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Digital services invoice (withheld) #4334

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
09 / 23 / 2013

**Transaction ID : SB29.5680**

Amount of Each Disbursement this Period  
1012.50

Category/Type: 004

**B. Campaign Solutions**

Full Name (Last, First, Middle Initial)

Mailing Address 117 N St Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Digital services invoice (withheld) #4376

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
11 / 11 / 2013

**Transaction ID : SB29.5681**

Amount of Each Disbursement this Period  
3879.85

Category/Type: 004

**C. Campaign Solutions**

Full Name (Last, First, Middle Initial)

Mailing Address 117 N St Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Digital services invoice (withheld) #4381

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
11 / 18 / 2013

**Transaction ID : SB29.5682**

Amount of Each Disbursement this Period  
5000.00

Category/Type: 004

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 9892.35

**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 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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)

**A. Campaign Solutions**

Mailing Address 117 N St Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Digital services invoice (withheld) #12486

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**004**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.5683**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Campaign Solutions**

Mailing Address 117 N St Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Digital services invoice (withheld) #12487

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**004**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.5684**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Campaign Solutions**

Mailing Address 117 N St Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Digital services invoice (withheld) #4397

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**004**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.5685**

Amount of Each Disbursement this Period

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

**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 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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)

**A. Campaign Solutions**

Mailing Address 117 N St Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Digital services invoice (withheld) #12573

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**004**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.5686**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Campaign Solutions**

Mailing Address 117 N St Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Digital services invoice (withheld) #12609

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**004**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.5687**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Campaign Solutions**

Mailing Address 117 N St Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Digital services invoice (withheld) #12631

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**004**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.5688**

Amount of Each Disbursement this Period

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

**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 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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)

**A. Campaign Solutions**

Mailing Address 117 N St Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
List rental fees

004

Candidate Name

Category/  
Type

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 Y  
12 / 31 / 2013

Transaction ID : SB29.5691

Amount of Each Disbursement this Period

30680.19

Full Name (Last, First, Middle Initial)

**B. CD, Inc**

Mailing Address PO Box 1877

City Alexandria State VA Zip Code 22313

Purpose of Disbursement  
marketing costs

003

Candidate Name

Category/  
Type

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 Y  
11 / 22 / 2013

Transaction ID : SB29.5663

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Conservative Connector**

Mailing Address 435 E. Main Street, Suite 250

City Greenwood State IN Zip Code 46143-1464

Purpose of Disbursement  
List Rental Fees

004

Candidate Name

Category/  
Type

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 Y  
09 / 19 / 2013

Transaction ID : SB29.5654

Amount of Each Disbursement this Period

282.10

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

35962.29

**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 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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)

**A. Cucinelli for Governor**

Mailing Address P.O. Box 6407

City Springfield State VA Zip Code 22150

Purpose of Disbursement  
Carey Account; State political contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.5658**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. DB Capitol Strategies**

Mailing Address 203 S. Union St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Legal and compliance consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.5623**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. DB Capitol Strategies**

Mailing Address 203 S. Union St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Carey Account; legal and compliance consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.5652**

Amount of Each Disbursement this Period

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

**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 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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)

**A. DB Capitol Strategies**

Mailing Address 203 S. Union St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Carey Account; legal and compliance consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.5655**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. DB Capitol Strategies**

Mailing Address 203 S. Union St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Public Relations Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.5667**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. DB Capitol Strategies**

Mailing Address 203 S. Union St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Carey Account; legal and compliance consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.5664**

Amount of Each Disbursement this Period

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

**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 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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)

**A. eDonation**

Mailing Address 117 North Saint Asaph Street

City Alexandra State VA Zip Code 22314

Purpose of Disbursement CAREY - online processing fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 07 / 01 / 2013

**Transaction ID : SB29.5589**

Amount of Each Disbursement this Period 1561.96

Category/Type 003

Full Name (Last, First, Middle Initial)

**B. eDonation**

Mailing Address 117 North Saint Asaph Street

City Alexandra State VA Zip Code 22314

Purpose of Disbursement CAREY - refund of test donations

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 07 / 01 / 2013

**Transaction ID : SB29.5591**

Amount of Each Disbursement this Period 25.00

Category/Type 003

Full Name (Last, First, Middle Initial)

**C. eDonation**

Mailing Address 117 North Saint Asaph Street

City Alexandra State VA Zip Code 22314

Purpose of Disbursement CAREY - email rental fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 07 / 01 / 2013

**Transaction ID : SB29.5593**

Amount of Each Disbursement this Period 6770.23

Category/Type 003

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 8357.19

**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 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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)

**A. eDonation**

Mailing Address 117 North Saint Asaph Street

City State Zip Code  
Alexandra VA 22314

Purpose of Disbursement  
online processing fees

003

Candidate Name

Category/  
Type

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 Y  
12 / 31 / 2013

Transaction ID : SB29.5690

Amount of Each Disbursement this Period

8643.62

Full Name (Last, First, Middle Initial)

**B. MDI Imaging & Mail**

Mailing Address 21955 Cascades Parkway

City State Zip Code  
Dulles VA 20166-9211

Purpose of Disbursement  
Direct mail vendor costs

003

Candidate Name

Category/  
Type

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 Y  
08 / 26 / 2013

Transaction ID : SB29.5651

Amount of Each Disbursement this Period

5036.05

Full Name (Last, First, Middle Initial)

**C. Prism Group**

Mailing Address 2511 Q St, NW

City State Zip Code  
Washington DC 20007

Purpose of Disbursement  
Public Relations Services

001

Candidate Name

Category/  
Type

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 Y  
08 / 21 / 2013

Transaction ID : SB29.5650

Amount of Each Disbursement this Period

1000.00

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

14679.67

**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 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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)

**A. Prism Group**

Mailing Address 2511 Q St, NW

City Washington State DC Zip Code 20007

Purpose of Disbursement  
Public Relations Services

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB29.5656**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Prism Group**

Mailing Address 2511 Q St, NW

City Washington State DC Zip Code 20007

Purpose of Disbursement  
Public Relations Services

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB29.5659**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Prism Group**

Mailing Address 2511 Q St, NW

City Washington State DC Zip Code 20007

Purpose of Disbursement  
Public Relations Services

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB29.5666**

Amount of Each Disbursement this Period

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

**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 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)  
**STOP HILLARY PAC**

Full Name (Last, First, Middle Initial)

**A. SCM Enterprises**

Mailing Address 203 S. Union St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Fundraising management fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY (12 / 02 / 2013)

Transaction ID : **SB29.5665**

Amount of Each Disbursement this Period: 4000.00

Category/Type: 001

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY

Amount of Each Disbursement this Period:

Category/Type:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY

Amount of Each Disbursement this Period:

Category/Type:

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	114134.13