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# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

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

Joe Kyrillos for US Senate

ADDRESS (number and street) PO Box 225

Check if different than previously reported. (ACC)

Colonia NJ 07067

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE STATE DISTRICT

C C00511238

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

NJ

### 4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

Termination Report (TER)

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

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

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

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

- General (30G)  Runoff (30R)  Special (30S)

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

5. Covering Period 10 01 2013 through 12 31 2013

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

Type or Print Name of Treasurer Ronald Gravino

Signature of Treasurer *Ronald Gravino* Date 01 09 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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FEC FORM 3 (Revised 02/2003)

14020013697

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Joe Kyrillos for US Senate**

Report Covering the Period: From:

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

To:

M M / D D / Y Y Y Y  
12 31 2013

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	10000.00	4632263.48
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	140963.36
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	10000.00	4491300.12
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	10000.00	4547746.14
(b) Total Offsets to Operating Expenditures (from Line 14).....	122.18	26594.56
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	9877.82	4521151.58
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>464.53</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>115833.32</b>	

**For further information contact:**

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

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

14020013698

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 11

Write or Type Committee Name

**Joe Kyrillos for US Senate**

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10000.00	4127871.50
(ii) Unitemized.....	0.00	273078.18
(iii) TOTAL of contributions from individuals ▶	10000.00	4400949.68
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	226313.80
(d) The Candidate.....	0.00	5000.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	10000.00	4632263.48
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	39957.23
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	39957.23
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....</b>	122.18	26594.56
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	615.99
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	10122.18	4699431.26

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 11

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	10000.00	4547746.14
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	4957.23
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	4957.23
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	138463.36
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	140963.36
21. OTHER DISBURSEMENTS .....	0.00	5300.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	10000.00	4698966.73

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	342.35
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	10122.18
25. SUBTOTAL (add Line 23 and Line 24).....	10464.53
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	10000.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	464.53

14020013700

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5 OF 11			
	(check only one)			
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15				

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

NAME OF COMMITTEE (In Full)  
**Joe Kyrillos for US Senate**

Full Name (Last, First, Middle Initial) <b>A. Roger Bodman</b>		Date of Receipt MM/DD/YYYY 11/21/2013
Mailing Address 59 Harbourton Mount Airy Road		Transaction ID : 40109.C10283
City Lambertville	State NJ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer PSJ, LLC	Occupation Public Affairs	Receipt
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Juan Fernandez</b>		Date of Receipt MM/DD/YYYY 11/25/2013
Mailing Address 11 Brier Court		Transaction ID : 40109.C10285
City New Providence	State NJ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer OTOole Fernandez Weiner Van L	Occupation Partner	Receipt
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Kevin OToole</b>		Date of Receipt MM/DD/YYYY 11/25/2013
Mailing Address 75 Skytop Rd		Transaction ID : 40109.C10287
City Cedar Grove	State NJ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer OTOole Fernandez Weiner Van L	Occupation Partner	Receipt
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)  
**Joe Kyrillos for US Senate**

Full Name (Last, First, Middle Initial) <b>A. Gary Van Lieu</b>		Date of Receipt MM/DD/YYYY <b>11/25/2013</b>
Mailing Address <b>802 Abby Rd</b>		Transaction ID : <b>40109.C10286</b>
City <b>Middletown</b>	State <b>NJ</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2500.00</b>
Name of Employer <b>OToole Fernandez Weiner Van L</b>	Occupation <b>Partner</b>	Receipt
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>5000.00</b>	

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>10000.00</b>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 11	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Joe Kyrillos for US Senate**

Full Name (Last, First, Middle Initial) <b>A. Fox Rothschild LLP</b>		Date of Disbursement MM / DD / YYYY <b>11 / 22 / 2013</b>
Mailing Address <b>2000 Market St Fl 20</b>		Amount of Each Disbursement this Period <b>2500.00</b> Transaction ID : <b>40109.E1499</b>
City <b>Philadelphia</b>	State <b>PA</b>	
Zip Code <b>19103-3222</b>	Purpose of Disbursement <b>Refund of Excessive Contribution</b>	Category/ Type <b>REFUND OF EXCESSIVE CONTRIBUTION</b>
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B. OToole Fernandez Weiner Van Lieu LLC</b>		Date of Disbursement MM / DD / YYYY <b>11 / 25 / 2013</b>
Mailing Address <b>60 Pompton Ave</b>		Amount of Each Disbursement this Period <b>7500.00</b> Transaction ID : <b>40109.E1498</b>
City <b>Verona</b>	State <b>NJ</b>	
Zip Code <b>07044-2946</b>	Purpose of Disbursement <b>Refund of Excessive Contribution</b>	Category/ Type <b>REFUND OF EXCESSIVE CONTRIBUTION</b>
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>10000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>10000.00</b>

14020013703

**SCHEDULE C (FEC Form 3)**

**LOANS**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Joe Kyrillos for US Senate** Transaction ID : **LS31008.C10282**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
**Joseph M Kyrillos Jr** \* PERSONAL FUNDS \*

Election: 2012  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
55 Farm Rd

City State ZIP Code  
Middletown NJ 07748-3703

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
39957.23	4957.23	35000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
12 / 20 / 2011	12 / 20 / 2011	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	35000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	35000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

14020013704



**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (in Full)  
**Joe Kyrillos for US Senate**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Ronald Gravino Consulting</b>	Nature of Debt (Purpose): Compliance Consulting
Mailing Address <b>PO Box 225</b>	
City State Zip Code <b>Colonia NJ 07067-0225</b>	

Outstanding Balance Beginning This Period <b>10000.00</b>	Transaction ID : <b>LS30802.E1481</b>
Amount Incurred This Period <b>0.00</b>	Payment This Period <b>0.00</b>
	Outstanding Balance at Close of This Period <b>10000.00</b>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Turnkey Productions</b>	Nature of Debt (Purpose): Fundraising
Mailing Address <b>370 Tall Tree Court</b>	
City State Zip Code <b>Jackson NJ 08527-3158</b>	

Outstanding Balance Beginning This Period <b>15000.00</b>	Transaction ID : <b>LS30805.E1482</b>
Amount Incurred This Period <b>0.00</b>	Payment This Period <b>0.00</b>
	Outstanding Balance at Close of This Period <b>15000.00</b>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Shore Point Medical Assoc., LLC</b>	Nature of Debt (Purpose): Refund of Excessive Contribution
Mailing Address <b>900 Highway 70</b>	
City State Zip Code <b>Lakewood NJ 08701-5940</b>	

Outstanding Balance Beginning This Period <b>2500.00</b>	Transaction ID : <b>LS30802.E1479</b>
Amount Incurred This Period <b>0.00</b>	Payment This Period <b>0.00</b>
	Outstanding Balance at Close of This Period <b>2500.00</b>

1) SUBTOTALS This Period This Page (optional).....▶	<b>27500.00</b>
2) TOTALS This Period (last page this line number only).....▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)▶	

14020013705

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Joe Kyrillos for US Senate**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>McElroy, Deutsch, Mulvaney &amp; Carpenter</b>		Nature of Debt (Purpose): Refund of Excessive Contribution
Mailing Address 1300 Mount Kemble Avenue PO Box 2075		
City State	Zip Code	
Morristown NJ	07960-8009	

Outstanding Balance Beginning This Period	Transaction ID : <b>LS30802.E1473</b>	
40833.32		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	40833.32

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Jamestown Associates</b>		Nature of Debt (Purpose): Media
Mailing Address 5 Mapleton Rd Ste 300		
City State	Zip Code	
Princeton NJ	08540-9646	

Outstanding Balance Beginning This Period	Transaction ID : <b>LS21130.E1404</b>	
10000.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	10000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Fox Rothschild LLP</b>		Nature of Debt (Purpose): Refund of Excessive Contribution
Mailing Address 2000 Market St Fl 20		
City State	Zip Code	
Philadelphia PA	19103-3222	

Outstanding Balance Beginning This Period	Transaction ID : <b>LS40109.E1499</b>	
2500.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	2500.00	0.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	50833.32
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	

14020013706

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Joe Kyrillos for US Senate**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>OToole Fernandez Weiner Van Lieu LLC</b>			Nature of Debt (Purpose): Refund of Excessive Contribution
Mailing Address 60 Pompton Ave			
City	State	Zip Code	
Verona	NJ	07044-2946	

Outstanding Balance Beginning This Period			Transaction ID : <b>LS40109.E1498</b>
7500.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	7500.00	0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Wissam Noun</b>			Nature of Debt (Purpose): Refund of Excessive Contribution
Mailing Address 3 Empire Blvd., South			
City	State	Zip Code	
South Hackensack	NJ	07606-1806	

Outstanding Balance Beginning This Period			Transaction ID : <b>LS30802.E1476</b>
2500.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	2500.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	2500.00
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	80833.32
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	35000.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)▶		115833.32

14020013707

NY 225  
14, 205 07067

01/17/14

77578

United States Postal Service  
**REGISTERED MAIL**



RB 5A0 6A6 8J9 US

Label 200, July 1999 - (102595) 99-M-1904

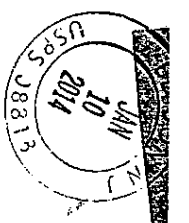
SECRETARY OF THE SENATE

OFFICE OF PUBLIC REWARDS

PO Box 77578

WASHINGTON, DC 20013-7578

SCREENED  
BY THE SENATE  
POST OFFICE



1000

20013

EDISON, NJ  
JAN 10 11 14  
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**\$13.57**  
00069098-05

80671002057



NANCY ERICKSON  
SECRETARY

DANA K. MCCALLUM  
SUPERINTENDENT  
HART SENATE OFFICE BUILDING  
SUITE 232  
WASHINGTON, DC 20510-7116  
PHONE: (202) 224-0322

# United States Senate

OFFICE OF THE SECRETARY  
OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark **1/10/14**

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark  
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

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

NEXT BUSINESS DAY DELIVERY

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

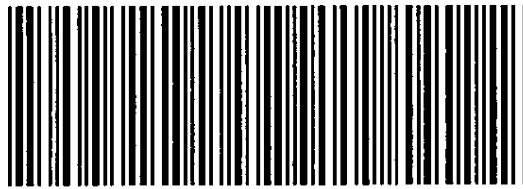
POSTMARK ILLEGIBLE  NO POSTMARK

FAX \_\_\_\_\_  
Date of Receipt

OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER MN DATE PREPARED 1/22/14

14020013709



14020013710