

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

BILL FLORES FOR CONGRESS

ADDRESS (number and street)

PO BOX 6207

Check if different than previously reported. (ACC)

BRYAN

TX

77805

2. **FEC IDENTIFICATION NUMBER**

C C00472241

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

TX

17

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

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 Nancy Rennaker

Signature of Treasurer Nancy Rennaker

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
BILL FLORES FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	123947.85	823418.58
(b) Total Contribution Refunds (from Line 20(d))	0.00	11400.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	123947.85	812018.58
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	25707.30	374354.02
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1276.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	25707.30	373078.02
8. Cash on Hand at Close of Reporting Period (from Line 27).....	470617.58	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	349743.90	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

BILL FLORES FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	35360.00	414900.00
(ii) Unitemized.....	1761.00	17115.00
(iii) TOTAL of contributions from individuals ▶	37121.00	432015.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	86826.85	391326.85
(d) The Candidate.....	0.00	76.73
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	123947.85	823418.58
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	3882.22
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	250000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	250000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	1276.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	107.17
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	123947.85	1078683.97

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	25707.30	374354.02
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	450000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	450000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	11400.00
(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 20(a), (b), and (c)).....	0.00	11400.00
21. OTHER DISBURSEMENTS	250.00	28050.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	25957.30	863804.02

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	372627.03
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	123947.85
25. SUBTOTAL (add Line 23 and Line 24).....	496574.88
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	25957.30
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	470617.58

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 49
	<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	

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Neal W. Adams

Mailing Address 201 Trailwood Dr

City State Zip Code
Eules TX 76039

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

Name of Employer Occupation
Adams Lynch & Loftin P.C. Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 12 / 2014

Transaction ID : SA11AI.6973

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Sonja Adams

Mailing Address 3950 State Highway 360 Ste 100

City State Zip Code
Grapevine TX 76051

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 12 / 2014

Transaction ID : SA11AI.6975

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Scott Anderson

Mailing Address 214 Millbrook St

City State Zip Code
Houston TX 77024

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

Name of Employer Occupation
Anderson Oil Ltd. Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.6977

Amount of Each Receipt this Period
1000.00

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

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

1500.00

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

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

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Andrew P. Biar

Mailing Address PO Box 79224

City Houston State TX Zip Code 77279

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

Name of Employer Strategic Public Affairs, Inc. Occupation President/Public Affairs Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2014

Transaction ID : SA11AI.6979

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. William W. Botts

Mailing Address 100 Lee Ave

City College Station State TX Zip Code 77840-3147

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.7095

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Dr. James A. Broaddus

Mailing Address 605 Rainbow Cv

City Austin State TX Zip Code 78746

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

Name of Employer Broaddus & Associates, Inc. Occupation President - Professional Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2014

Transaction ID : SA11AI.6774

Amount of Each Receipt this Period
1000.00

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

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

1750.00

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

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

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. John W. Clanton

Mailing Address 8944 Steep Hollow Rd

City State Zip Code
Bryan TX 77808-2413

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

Name of Employer Occupation
Lynntech Inc Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.7093

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. James A. Creel

Mailing Address 5845 Forest Bend Pl

City State Zip Code
Fort Worth TX 76112

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

Name of Employer Occupation
Brackett & Ellis, PC Tax Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 30 / 2014

Transaction ID : SA11AI.6981

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Cletus A. Davis

Mailing Address 724 S Rosemary Dr

City State Zip Code
Bryan TX 77802

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 30 / 2014

Transaction ID : SA11AI.6982

Amount of Each Receipt this Period
50.00

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

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

1550.00

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

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

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mrs. Mary Beth Donalson

Mailing Address 5124 Golden Ln

City Fort Worth State TX Zip Code 76123

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

Name of Employer None Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.6984

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Dana Farmer

Mailing Address 600 17th St Ste 1700N

City Denver State CO Zip Code 80202

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

Name of Employer Housewife Occupation Housewife

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 16 / 2014

Transaction ID : SA11AI.6986

Amount of Each Receipt this Period
 2400.00

C. Full Name (Last, First, Middle Initial)
Mr. J. Charles Farmer

Mailing Address 600 17th St Ste 1700N

City Denver State CO Zip Code 80202

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

Name of Employer Saga Petroleum Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 16 / 2014

Transaction ID : SA11AI.6988

Amount of Each Receipt this Period
 2600.00

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

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

5250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 49
	<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	

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Joe P. Flores

Mailing Address PO Box 147

City Stratford State TX Zip Code 79084

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

Name of Employer TEXAS FARM BUREAU INSURANCE Occupation INSURANCE AGENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3870.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 23 / 2014

Transaction ID : SA11AI.6989

Amount of Each Receipt this Period
430.00

B. Full Name (Last, First, Middle Initial)
Mr. Joe P. Flores

Mailing Address PO Box 147

City Stratford State TX Zip Code 79084

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

Name of Employer TEXAS FARM BUREAU INSURANCE Occupation INSURANCE AGENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4300.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : SA11AI.6990

Amount of Each Receipt this Period
430.00

C. Full Name (Last, First, Middle Initial)
Mr. William W. Franklin

Mailing Address 303 Briarwood Trl

City Austin State TX Zip Code 78746

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

Name of Employer Franklin Statagy Group Occupation Political Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 20 / 2014

Transaction ID : SA11AI.6992

Amount of Each Receipt this Period
250.00

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

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

1110.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Noe Garcia III

Mailing Address 901 N Pollard St Apt 1505

City	State	Zip Code
Arlington	VA	22203

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

Name of Employer	Occupation
Corporate Political Strategies, LLC	Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 03 / 2014

Transaction ID : SA11AI.6994

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Wilton N. Hammond

Mailing Address 3805 Crestwood Ter

City	State	Zip Code
Fort Worth	TX	76107

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

Name of Employer	Occupation
Retired	Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : SA11AI.6996

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mrs. Beth Hampton

Mailing Address 6521 Valencia Grove Pass

City	State	Zip Code
Fort Worth	TX	76132

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

Name of Employer	Occupation
Balcutis McCully & Sawyer, PC	Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.6998

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

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

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Jon Rex Jones

Mailing Address PO Box 2612

City Albany State TX Zip Code 76430

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

Name of Employer Jones Management Corp. Occupation Oil Producer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : SA11AI.6626

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Mr. James L. Keller

Mailing Address 5929 Wild Horse Run

City College Station State TX Zip Code 77845

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

Name of Employer Texas A&M Occupation Director of Development

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.6999

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. Scott M. Kleberg

Mailing Address 301 Commerce St Ste 1300

City Fort Worth State TX Zip Code 76102

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

Name of Employer CA Partners, LLC Occupation Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 21 / 2014

Transaction ID : SA11AI.7001

Amount of Each Receipt this Period
250.00

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

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

2300.00

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

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

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
R. Bruce Laboon

Mailing Address 100 Congress Ave., Ste. 300

City Austin State TX Zip Code 78701

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

Name of Employer Locke Lord Bissell & Liddell Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11AI.6796

Amount of Each Receipt this Period
 2000.00

B. Full Name (Last, First, Middle Initial)
Mr. William David Lacy

Mailing Address PO Box 1701

City Waco State TX Zip Code 76703

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

Name of Employer Community Bank & Trust Occupation Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2014

Transaction ID : SA11AI.7002

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Joe LaMantia III

Mailing Address 3900 N McColl Rd

City McAllen State TX Zip Code 78501

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

Name of Employer L & F Distributors Ltd Occupation executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : SA11AI.7004

Amount of Each Receipt this Period
 2600.00

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

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

5600.00

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

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

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Lawrence P. Marlin

Mailing Address 4713 River Wood Ct

City State Zip Code
Bryan TX 77808

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2400.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 18 / 2014

Transaction ID : SA11AI.7005

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
Mr. Gary C. Martin

Mailing Address PO Box 91588

City State Zip Code
Arlington TX 76015

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

Name of Employer Occupation
Martin Sprocket & Gear Vice Chair

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : SA11AI.7006

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Mr. Walter Goldston Mayfield

Mailing Address PO Box 570365

City State Zip Code
Houston TX 77527

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

Name of Employer Occupation
Goldston Oil Corp. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 21 / 2014

Transaction ID : SA11AI.6787

Amount of Each Receipt this Period
1500.00

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

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

4500.00

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

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

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Mike McConnell

Mailing Address 3311 Far View Dr

City Austin State TX Zip Code 78730

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

Name of Employer Jones Energy Occupation Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : SA11AI.7008

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Randall D. McDougal

Mailing Address 13451 Alacia Ct

City College Station State TX Zip Code 77845-7090

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.7101

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Othel M. Neely

Mailing Address 455 Winding Circle Lane

City McGregor State TX Zip Code 76657

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1625.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.7009

Amount of Each Receipt this Period
100.00

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

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

1100.00

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

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

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. James A. Noone

Mailing Address 4810 Bentonbrook Dr

City Fairfax	State VA	Zip Code 22030-5404
-----------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.7099

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Val LaMantia Peisen

Mailing Address 112 W Jackson Ave

City McAllen	State TX	Zip Code 78501
-----------------	-------------	-------------------

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

Name of Employer L&F Distributors, LLC	Occupation Beverage Distributor
---	------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : SA11AI.7011

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Mr. Fred W. Rabalais

Mailing Address PO Box 1567

City Fort Worth	State TX	Zip Code 76101
--------------------	-------------	-------------------

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

Name of Employer Rabalais Oil	Occupation Oil & Gas Producer
----------------------------------	----------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : SA11AI.7013

Amount of Each Receipt this Period
250.00

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

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

3100.00

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

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

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. C. Clifton Robinson		Date of Receipt M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address PO Box 2028		Transaction ID : SA11AI.6630
City Waco	State TX	Zip Code 76703
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1600.00	
Name of Employer National Group Corp.	Occupation Chairman of the Board/Real Estate	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) B. Mr. C. Clifton Robinson		Date of Receipt M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address PO Box 2028		Transaction ID : SA11AI.6639
City Waco	State TX	Zip Code 76703
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 900.00	
Name of Employer National Group Corp.	Occupation Chairman of the Board/Real Estate	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500.00	

Full Name (Last, First, Middle Initial) C. Mr. John Oscar Robinson		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address PO Box 9556		Transaction ID : SA11AI.7015
City Austin	State TX	Zip Code 78766
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Austin White Lime Co.	Occupation partner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	3500.00
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms. Wendel Skolaski

Mailing Address 1309 Mickey Way

City Houston State TX Zip Code 77055

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

Name of Employer Cadence Bank Occupation Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 28 / 2014

Transaction ID : SA11AI.7016

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Clifford Spiegelman

Mailing Address 10528 Dogwood Trl

City College Station State TX Zip Code 77845

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

Name of Employer TAMU Occupation Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 03 / 2014

Transaction ID : SA11AI.7017

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. John F. Stuart

Mailing Address 5311 Riviera Ct

City College Station State TX Zip Code 77845-4156

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.7097

Amount of Each Receipt this Period
500.00

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

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

600.00

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

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

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Heyward Taylor

Mailing Address PO Box 8152

City State Zip Code
Waco TX 76714

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

Name of Employer Occupation
Lakeland West Capital Finance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 21 / 2014

Transaction ID : SA11AI.7019

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Timothy Timmerman

Mailing Address 4903 Whitehorn Ct.

City State Zip Code
Austin TX 78746

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

Name of Employer Occupation
Self Employed Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 24 / 2014

Transaction ID : SA11AI.6791

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mrs. Patricia Wiseman

Mailing Address 3023 Iron Stone Ct

City State Zip Code
San Antonio TX 78230

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 16 / 2014

Transaction ID : SA11AI.7020

Amount of Each Receipt this Period
500.00

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

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

2500.00

35360.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 49
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACSPA-Surgeons PAC

Mailing Address 20 F St NW Ste 1000

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00382424**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 04 / 2014

Transaction ID : SA11C.7065

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Action Committee for Rural Electrification

Mailing Address 4301 Wilson Blvd

City Arlington State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C C00002972**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 04 / 2014

Transaction ID : SA11C.7066

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
Action Committee for Rural Electrification

Mailing Address 4301 Wilson Blvd

City Arlington State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C C00002972**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 04 / 2014

Transaction ID : SA11C.7067

Amount of Each Receipt this Period
1000.00

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

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

4500.00

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

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

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AICPA PAC

Mailing Address 220 Leigh Farm Rd

City State Zip Code
Durham NC 27707

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 03 / 2014

Transaction ID : SA11C.7068

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
American Airlines PAC

Mailing Address 1101 17th St NW Ste 600

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00107300

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 25 / 2014

Transaction ID : SA11C.6805

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
American Bankers Association PAC (BANKPAC)

Mailing Address 1120 Connecticut Ave NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 04 / 2014

Transaction ID : SA11C.7069

Amount of Each Receipt this Period
2500.00

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

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

8500.00

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

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

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
American College of Cardiology PAC

Mailing Address 2400 N St NW # Lbby

City Washington State DC Zip Code 20037

FEC ID number of contributing federal political committee. **C C00375360**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 04 / 2014

Transaction ID : SA11C.7070

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 25 MASSACHUSETTS AVE, NW
SUITE 600

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00000422**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 04 / 2014

Transaction ID : SA11C.7071

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE

Mailing Address 520 N. NORTHWEST HIGHWAY

City PARK RIDGE State IL Zip Code 60068

FEC ID number of contributing federal political committee. **C C00255752**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2014

Transaction ID : SA11C.6821

Amount of Each Receipt this Period
2000.00

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

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

9500.00

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

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

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BNSF RAILPAC

Mailing Address PO Box 961039

City State Zip Code
Fort Worth TX 76161

FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 04 / 2014

Transaction ID : SA11C.7072

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
BNSF RAILPAC

Mailing Address PO Box 961039

City State Zip Code
Fort Worth TX 76161

FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5372.85

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11C.7085

Amount of Each Receipt this Period
1872.85

C. Full Name (Last, First, Middle Initial)
Border Health PAC

Mailing Address 612 W Nolana, Building 300 Ste 340

City State Zip Code
McAllen TX 78504

FEC ID number of contributing federal political committee. **C** C00415752

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 25 / 2014

Transaction ID : SA11C.7073

Amount of Each Receipt this Period
5000.00

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

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

9372.85

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

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

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Build PAC of the National Association of Home Builders

Mailing Address 1201 15th St NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2014

Transaction ID : SA11C.6779

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Build PAC of the National Association of Home Builders

Mailing Address 1201 15th St NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2014

Transaction ID : SA11C.6818

Amount of Each Receipt this Period
 2000.00

C. Full Name (Last, First, Middle Initial)
Chesapeake Energy Corporation Fed-PAC

Mailing Address PO Box 18496

City Oklahoma City State OK Zip Code 73154-0496

FEC ID number of contributing federal political committee. **C** C00389288

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2014

Transaction ID : SA11C.6807

Amount of Each Receipt this Period
 2500.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 49
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

Full Name (Last, First, Middle Initial) Compass BancPac		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address PO Box 10566		Transaction ID : SA11C.7090
City Birmingham	State AL	Zip Code 35202
FEC ID number of contributing federal political committee. C C00142596	Amount of Each Receipt this Period 1000.00	
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) Energy Transfer Partners PAC		Date of Receipt M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 400 W 15th St Ste 720		Transaction ID : SA11C.6782
City Austin	State TX	Zip Code 78701
FEC ID number of contributing federal political committee. C C00438754	Amount of Each Receipt this Period 1000.00	
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500.00	

Full Name (Last, First, Middle Initial) Enterprise Products Partners, L.P. Political Action Committee		Date of Receipt M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 1100 Louisiana St		Transaction ID : SA11C.6771
City Houston	State TX	Zip Code 77002
FEC ID number of contributing federal political committee. C C00496752	Amount of Each Receipt this Period 2500.00	
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Every Republican is Crucial (ERICPAC)

Mailing Address 25 E Main St Ste 200

City Richmond State VA Zip Code 23219

FEC ID number of contributing federal political committee. **C** C00384701

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 25 / 2014

Transaction ID : SA11C.6808

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
FEDBID INC ACQUISITION INNOVATION AND REFORM PAC FEDBID AIRPAC (ABBR. NAME)

Mailing Address 8500 LEESBURG PIKE SUITE 602

City VIENNA State VA Zip Code 22182

FEC ID number of contributing federal political committee. **C** C00448449

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11C.7091

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Franchising Political Action Committee

Mailing Address 1501 K St NW Ste 350

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00084491

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 04 / 2014

Transaction ID : SA11C.7074

Amount of Each Receipt this Period
3000.00

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

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

9000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 49
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
General Electric Company PAC

Mailing Address 1299 Pennsylvania Ave NW

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00024869**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 25 / 2014

Transaction ID : SA11C.6804

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Gulf States Toyota, Inc. Federal PAC

Mailing Address 1375 Enclave Parkway

City Houston State TX Zip Code 77077

FEC ID number of contributing federal political committee. **C C00349373**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 25 / 2014

Transaction ID : SA11C.6801

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Independent Insurance Agents & Brokers of America, INC. Political Action Committee

Mailing Address 412 1st St SE Ste 300

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C C00022343**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 04 / 2014

Transaction ID : SA11C.7075

Amount of Each Receipt this Period
1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 49
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KBR, INC. PAC

Mailing Address 601 JEFFERSON
SUITE 3746C

City HOUSTON State TX Zip Code 77002

FEC ID number of contributing federal political committee. **C** C00431114

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2014

Transaction ID : SA11C.6773

Amount of Each Receipt this Period
 5000.00

B. Full Name (Last, First, Middle Initial)
MINE PAC

Mailing Address 101 Constitution Ave NW Ste 500

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00304634

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 03 / 2014

Transaction ID : SA11C.7076

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL APARTMENT ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 4300 WILSON BLVD
SUITE 400

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00113241

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11C.6794

Amount of Each Receipt this Period
 5000.00

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

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

11000.00

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

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

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. National Beer Wholesalers Association PAC

Full Name (Last, First, Middle Initial)
National Beer Wholesalers Association PAC

Mailing Address 1101 King St Ste 600

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2014

Transaction ID : SA11C.7077

Amount of Each Receipt this Period
 2500.00

B. National Emergency Medicine PAC (NEMPAC)

Full Name (Last, First, Middle Initial)
National Emergency Medicine PAC (NEMPAC)

Mailing Address PO Box 619911

City Dallas State TX Zip Code 75038

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11C.7089

Amount of Each Receipt this Period
 1500.00

C. NRA-Political Victory Fund

Full Name (Last, First, Middle Initial)
NRA-Political Victory Fund

Mailing Address 11250 Waples Mill Rd

City Fairfax State VA Zip Code 22030

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 04 / 2014

Transaction ID : SA11C.7078

Amount of Each Receipt this Period
 1000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 49
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Nucor Political Action Committee		Date of Receipt M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 1915 Rexford Rd		Transaction ID : SA11C.6802
City State Zip Code Charlotte NC 28211	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00379628	Name of Employer Occupation	Amount of Each Receipt this Period 2000.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) B. Power PAC of Luminant Holding Company		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 601 Pennsylvania Ave NW Ste 850		Transaction ID : SA11C.7084
City State Zip Code Washington DC 20004	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00255950	Name of Employer Occupation	Amount of Each Receipt this Period 7500.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 7500.00	

Full Name (Last, First, Middle Initial) C. Pricewaterhouse Coopers PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 1301 K St NW Ste 800W		Transaction ID : SA11C.7079
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00232173	Name of Employer Occupation	Amount of Each Receipt this Period 6000.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 6000.00	

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 49
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PROSPERITY ACTION INC.

Mailing Address 1006 PENDLETON STREET

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00377689

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11C.7082

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Space Exploration Technologies Corp PAC

Mailing Address 1 Rocket Rd

City State Zip Code
Hawthorne CA 90250

FEC ID number of contributing federal political committee. **C** C00411116

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 25 / 2014

Transaction ID : SA11C.6806

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Union Pacific Corp. Fund For Effective Government

Mailing Address 600 13th St NW Ste 340

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1121.26

Date of Receipt
M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : SA11C.7087

Amount of Each Receipt this Period
121.26
In-kind - event expenses

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

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

6121.26

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

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

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Union Pacific Corp. Fund For Effective Government

Mailing Address 600 13th St NW Ste 340

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00010470**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11C.7086

Amount of Each Receipt this Period
1878.74

B. Full Name (Last, First, Middle Initial)
VALERO PAC

Mailing Address PO Box 696000

City San Antonio State TX Zip Code 78269

FEC ID number of contributing federal political committee. **C C00109546**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 16 / 2014

Transaction ID : SA11C.7080

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
WHITFIELD FOR CONGRESS COMMITTEE

Mailing Address P.O. BOX 391

City HOPKINSVILLE State KY Zip Code 42241

FEC ID number of contributing federal political committee. **C C00289983**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
954.00

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 07 / 2014

Transaction ID : SA11C.7103

Amount of Each Receipt this Period
954.00

In-kind - travel expenses

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

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

5332.74

86826.85

**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 32 OF 49			
	<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)
BILL FLORES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address PO Box 650448		Amount of Each Disbursement this Period 4419.41 Transaction ID : SB17.6829
City Dallas	State TX	
Zip Code 75265-0448	Purpose of Disbursement Printing, fuel, meal expenses, shipping, parking, telephone, web hosting... (see below if itemized)	Category/ Type
Candidate Name	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. Big's 108		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 4301 Boonville Rd.		Amount of Each Disbursement this Period 116.60 Transaction ID : SB17.6829.1 [MEMO ITEM]
City Bryan	State TX	
Zip Code 77802	Purpose of Disbursement Fuel	Category/ Type
Candidate Name	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) C. UPS		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address PO Box 7247-0244		Amount of Each Disbursement this Period 40.46 Transaction ID : SB17.6829.5 [MEMO ITEM]
City Philadelphia	State PA	
Zip Code 19170-0001	Purpose of Disbursement Express shipping	Category/ Type
Candidate Name	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:	

SUBTOTAL of Disbursements This Page (optional).....	4419.41
TOTAL This Period (last page this line number only).....	

**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 33 OF 49			
	<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)
BILL FLORES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 470.10
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Meal expenses	
Candidate Name	Category/Type	Transaction ID : SB17.6829.6 [MEMO ITEM]
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. Upstream Communications		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 1609 Shoal Creek Boulevard Suite 203		Amount of Each Disbursement this Period 2845.95
City Austin State TX Zip Code 78701-1022	Purpose of Disbursement Website Hosting, Email Broadcast Services, Social Media Services, Donation Capture Fees	
Candidate Name	Category/Type	Transaction ID : SB17.6829.7 [MEMO ITEM]
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) C. J2 Global Phone People		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 6922 Hollywood Boulevard		Amount of Each Disbursement this Period 29.95
City Hollywood State CA Zip Code 90028-6117	Purpose of Disbursement Telephone service	
Candidate Name	Category/Type	Transaction ID : SB17.6829.8 [MEMO ITEM]
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:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**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 34 OF 49			
	<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)
BILL FLORES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Brazos Moving and Storage		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 2704 Boonville Road		Amount of Each Disbursement this Period 179.95
City Bryan	State TX	
Zip Code 77808-2228	Purpose of Disbursement Storage rental	Transaction ID : SB17.6829.12
Candidate Name	Category/ Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Aaron's Self Storage		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 501 Hewitt Drive		Amount of Each Disbursement this Period 150.00
City Waco	State TX	
Zip Code 76712-6411	Purpose of Disbursement Storage rental	Transaction ID : SB17.6829.13
Candidate Name	Category/ Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. VONAGE		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 23 Main Street		Amount of Each Disbursement this Period 40.36
City Holmdel	State NJ	
Zip Code 07733-2136	Purpose of Disbursement Telephone service	Transaction ID : SB17.6829.14
Candidate Name	Category/ Type	
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)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**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 35 OF 49			
	<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)
BILL FLORES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. INTUIT		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 29.81
City Mountain View	State CA	
Zip Code 94043-1126	Purpose of Disbursement Software service	Transaction ID : SB17.6829.15
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. American Express AMEX		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 7.95
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit card fees	Transaction ID : SB17.6939
Candidate Name	Category/Type	
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) C. American Express AMEX		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 25.15
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit card fees	Transaction ID : SB17.6941
Candidate Name	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	33.10
TOTAL This Period (last page this line number only).....	

**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 36 OF 49		
	<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)
BILL FLORES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. American Express AMEX		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 1.60 Transaction ID : SB17.6940
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit card fees	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:	

Full Name (Last, First, Middle Initial) B. DR BRIAN BABIN FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address PO BOX 159		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.6871
City WOODVILLE	State TX	
Zip Code 75979	Purpose of Disbursement Campaign contribution	Category/ Type
Candidate Name BRIAN BABIN	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 36	

Full Name (Last, First, Middle Initial) c. E-Onlinedata		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 280 Fore Street		Amount of Each Disbursement this Period 3.92 Transaction ID : SB17.6942
City Portland	State ME	
Zip Code 04101-4177	Purpose of Disbursement Credit card fees	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:	

SUBTOTAL of Disbursements This Page (optional).....	2005.52
TOTAL This Period (last page this line number only).....	

**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 37 OF 49			
	<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)
BILL FLORES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. E-Onlinedata		Date of Disbursement
Mailing Address 280 Fore Street		M M / D D / Y Y Y Y 02 / 24 / 2014
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit card fees	Candidate Name	Amount of Each Disbursement this Period 12.02
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. E-Onlinedata		Date of Disbursement
Mailing Address 280 Fore Street		M M / D D / Y Y Y Y 02 / 25 / 2014
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit card fees	Candidate Name	Amount of Each Disbursement this Period 16.86
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. E-Onlinedata		Date of Disbursement
Mailing Address 280 Fore Street		M M / D D / Y Y Y Y 03 / 04 / 2014
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit card fees	Candidate Name	Amount of Each Disbursement this Period 38.99
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	67.87
TOTAL This Period (last page this line number only).....	

**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 38 OF 49		
	<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)
BILL FLORES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. E-Onlinedata		Date of Disbursement
Mailing Address 280 Fore Street		MM / DD / YYYY 03 / 11 / 2014
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit card fees	Candidate Name	Amount of Each Disbursement this Period 2.22
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: _____	Category/ Type

Full Name (Last, First, Middle Initial) B. E-Onlinedata		Date of Disbursement
Mailing Address 280 Fore Street		MM / DD / YYYY 03 / 17 / 2014
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit card fees	Candidate Name	Amount of Each Disbursement this Period 121.52
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: _____	Category/ Type

Full Name (Last, First, Middle Initial) C. E-Onlinedata		Date of Disbursement
Mailing Address 280 Fore Street		MM / DD / YYYY 03 / 25 / 2014
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit card fees	Candidate Name	Amount of Each Disbursement this Period 78.40
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: _____	Category/ Type

SUBTOTAL of Disbursements This Page (optional).....	202.14
TOTAL This Period (last page this line number only).....	

**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 39 OF 49		
	<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)
BILL FLORES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. E-Onlinedata		Date of Disbursement
Mailing Address 280 Fore Street		M M / D D / Y Y Y Y 03 / 27 / 2014
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit card fees	Candidate Name	Amount of Each Disbursement this Period 20.06
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. E-Onlinedata		Date of Disbursement
Mailing Address 280 Fore Street		M M / D D / Y Y Y Y 03 / 28 / 2014
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit card fees	Candidate Name	Amount of Each Disbursement this Period 3.63
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:	Category/Type	

Full Name (Last, First, Middle Initial) c. Gober Hilgers PLLC		Date of Disbursement
Mailing Address 2101 Cedar Springs Road Suite 1050		M M / D D / Y Y Y Y 03 / 07 / 2014
City Dallas	State TX	Zip Code 75201-2104
Purpose of Disbursement Legal and compliance services	Candidate Name	Amount of Each Disbursement this Period 2000.00
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	2023.69
TOTAL This Period (last page this line number only).....	

**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 40 OF 49			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Lilly & Company		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 1005 Congress Avenue Suite 910		Amount of Each Disbursement this Period 5429.77
City Austin State TX Zip Code 78701-2467	Purpose of Disbursement Consulting - fundraising 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:		

Full Name (Last, First, Middle Initial) B. Marathon Strategic Communications		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 3771 Vinecrest Dr.		Amount of Each Disbursement this Period 1500.00
City Dallas State TX Zip Code 75229	Purpose of Disbursement Consultant-Communications 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:		

Full Name (Last, First, Middle Initial) c. Marathon Strategic Communications		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 3771 Vinecrest Dr.		Amount of Each Disbursement this Period 1500.00
City Dallas State TX Zip Code 75229	Purpose of Disbursement Consultant-Communications 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:		

SUBTOTAL of Disbursements This Page (optional).....	8429.77
TOTAL This Period (last page this line number only).....	

**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 41 OF 49			
	<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)
BILL FLORES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jeff Moorehouse		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 1505 Longworth Hob		Amount of Each Disbursement this Period 2060.44 Transaction ID : SB17.6873
City Washington	State DC	
Zip Code 20515	Purpose of Disbursement Reimbursement - lodging, transportation (see below if itemized)	Category/ Type
Candidate Name	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. Hotel Madeline Telluride		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 568 Mountain Village Blvd.		Amount of Each Disbursement this Period 1838.53 Transaction ID : SB17.6873.0 [MEMO ITEM]
City Telluride	State CO	
Zip Code 81435	Purpose of Disbursement Lodging	Category/ Type
Candidate Name	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) c. Alamo Car Rental		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 2100 Arpt. Rd.		Amount of Each Disbursement this Period 221.91 Transaction ID : SB17.6873.1 [MEMO ITEM]
City Montrose	State CO	
Zip Code 81401	Purpose of Disbursement Transportation	Category/ Type
Candidate Name	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:	

SUBTOTAL of Disbursements This Page (optional).....	2060.44
TOTAL This Period (last page this line number only).....	

**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 42 OF 49	
	<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)
BILL FLORES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Turnbull Mfg. Co, Inc.		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 6680 Routes 5 & 20		Amount of Each Disbursement this Period 5060.00 Transaction ID : SB17.6827
City Bloomfield	State NY	
Zip Code 14469	Purpose of Disbursement Silent Auction items	Category/ Type
Candidate Name	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. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 95.55 Transaction ID : SB17.6749
City Dallas	State TX	
Zip Code 75266-0108	Purpose of Disbursement Telephone service	Category/ Type
Candidate Name	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) C. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 95.55 Transaction ID : SB17.6867
City Dallas	State TX	
Zip Code 75266-0108	Purpose of Disbursement Telephone service	Category/ Type
Candidate Name	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:	

SUBTOTAL of Disbursements This Page (optional).....	5251.10
TOTAL This Period (last page this line number only).....	

**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 43 OF 49		
	<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)
BILL FLORES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WHITFIELD FOR CONGRESS COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address P.O. BOX 391		Amount of Each Disbursement this Period 954.00
City HOPKINSVILLE	State KY	
Zip Code 42241	Purpose of Disbursement In-kind - travel expenses	Transaction ID : SB17.7106
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: KY	District: 01	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Transaction ID
Candidate Name	Category/Type	
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) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Transaction ID
Candidate Name	Category/Type	
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:	

SUBTOTAL of Disbursements This Page (optional).....	954.00
TOTAL This Period (last page this line number only).....	25447.04

**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 44 OF 49			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BILL FLORES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BILL PAC		Date of Disbursement										
Mailing Address PO Box 4528		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>13</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	03		13		2014
M M	/	D D	/	Y Y Y Y								
03		13		2014								
City	State	Zip Code										
Bryan	TX	77805										
Purpose of Disbursement PAC Contribution	<input type="text"/>											
Candidate Name	<input type="text"/>											
Office Sought:	House	Disbursement For:										
	Senate											
	President											
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)										
Amount of Each Disbursement this Period		<input type="text"/> 250.00										
Transaction ID : SB21.6958												

Full Name (Last, First, Middle Initial) B.		Date of Disbursement										
Mailing Address		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y								
City	State	Zip Code										
Purpose of Disbursement	<input type="text"/>											
Candidate Name	<input type="text"/>											
Office Sought:	House	Disbursement For:										
	Senate											
	President											
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)										
Amount of Each Disbursement this Period		<input type="text"/>										

Full Name (Last, First, Middle Initial) C.		Date of Disbursement										
Mailing Address		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y								
City	State	Zip Code										
Purpose of Disbursement	<input type="text"/>											
Candidate Name	<input type="text"/>											
Office Sought:	House	Disbursement For:										
	Senate											
	President											
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)										
Amount of Each Disbursement this Period		<input type="text"/>										

SUBTOTAL of Disbursements This Page (optional).....	<input type="text"/> 250.00
TOTAL This Period (last page this line number only).....	<input type="text"/> 250.00

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)

Transaction ID : SC/10.4512

BILL FLORES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2010

BILL FLORES

Primary

General

Other (specify) ▼

Mailing Address
PO BOX 6207

City State ZIP Code
BRYAN TX 77805

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
250000.00 147250.00 102750.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 12 M /

D 31 D /

Y 2009 Y

M M /

D D /

Y None Y

0.00 % (apr)

Yes No

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

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

SUBTOTALS This Period This Page (optional)..... 102750.00
TOTALS This Period (last page in this line only).....

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

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)

Transaction ID : SC/10.4519

BILL FLORES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2010

BILL FLORES

Primary

General

Other (specify) ▼

Mailing Address
PO BOX 6207

City State ZIP Code
BRYAN TX 77805

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
225000.00 9750.00 185250.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 11 M

D 01 D

Y 2010 Y

M M

D D

Y None Y

0.00 % (apr)

Yes No

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

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

SUBTOTALS This Period This Page (optional)..... 185250.00

TOTALS This Period (last page in this line only).....

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

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

Form/Schedule: SC/10

Transaction ID : SC/10.4519

(Current loan amount of 30000.00 from a balance of 225000.00 has been forgiven)

Form/Schedule:

Transaction ID:

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)

Transaction ID : SC/10.4335

BILL FLORES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

BILL FLORES

Primary

General

Other (specify) ▼

Mailing Address
PO BOX 6207

City State ZIP Code
BRYAN TX 77805

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
50000.00 0.00 50000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 12 M /

D 31 D /

Y 2010 Y

M M /

D D /

Y None Y

0.00 % (apr)

Yes

No

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

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

SUBTOTALS This Period This Page (optional)..... 50000.00
TOTALS This Period (last page in this line only)..... 338000.00

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

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

NAME OF COMMITTEE (In Full)

BILL FLORES FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Gober Hilgers PLLC

Mailing Address 2101 Cedar Springs Road
 Suite 1050

City State Zip Code
 Dallas TX 75201-2104

Nature of Debt (Purpose):
 Legal and Accounting Fees

Outstanding Balance Beginning This Period	Transaction ID : SD10.5821	
<input type="text" value="2000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="2000.00"/>	<input type="text" value="2000.00"/>	<input type="text" value="2000.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Lilly & Company

Mailing Address 1005 Congress Avenue
 Suite 910

City State Zip Code
 Austin TX 78701-2467

Nature of Debt (Purpose):
 Consulting - Fundraising

Outstanding Balance Beginning This Period	Transaction ID : SD10.5819	
<input type="text" value="5429.77"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="9743.90"/>	<input type="text" value="5429.77"/>	<input type="text" value="9743.90"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="11743.90"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="11743.90"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="338000.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="349743.90"/>