

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.
COUNTRY FIRST POLITICAL ACTION COMMITTEE

ADDRESS (number and street)
Check if different than previously reported. (ACC) ALEXANDRIA VA 22314

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 01 / 01 / 2014 through 03 / 31 / 2014

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

Type or Print Name of Treasurer Salvatore Purpura

Signature of Treasurer Salvatore Purpura [Electronically Filed] Date 04 / 09 / 2014

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

COUNTRY FIRST POLITICAL ACTION COMMITTEE

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		<input type="text" value="125048.34"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="125048.34"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="54845.27"/>	<input type="text" value="54845.27"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="179893.61"/>	<input type="text" value="179893.61"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="148699.19"/>	<input type="text" value="148699.19"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="31194.42"/>	<input type="text" value="31194.42"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

COUNTRY FIRST POLITICAL ACTION COMMITTEE

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	19925.00	19925.00
(ii) Unitemized	12497.62	12497.62
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	32422.62	32422.62
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	7000.00	7000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	39422.62	39422.62
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	15422.65	15422.65
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	54845.27	54845.27
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	54845.27	54845.27

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	132699.19	132699.19
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	132699.19	132699.19
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	16000.00	16000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	148699.19	148699.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	148699.19	148699.19

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	39422.62	39422.62
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	39422.62	39422.62
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	132699.19	132699.19
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	132699.19	132699.19

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

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

FOR LINE NUMBER: PAGE 6 OF 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

A. MR. ALEX DAMELIO
 Full Name (Last, First, Middle Initial)
 Mailing Address 180 MCCOY RD
 City SALVISA State KY Zip Code 40372-9500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2014
Transaction ID : SA11.3082696
 Amount of Each Receipt this Period
 350.00
 CONTRIBUTION

B. MR. EDWARD W. FRANKLIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 275 CENTRAL PARK W.
 APARTMENT 19B
 City NEW YORK State NY Zip Code 10024-3058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 10 / 2014
Transaction ID : SA11.3082846
 Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

C. MR. ROBERT W. GARTHWAIT SR.
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 1367
 City WATERBURY State CT Zip Code 06721-1367
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CLY-DEL MANUFACTURING COMPANY Occupation CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2014
Transaction ID : SA11.3082706
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1150.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

A. MR. ERNEST E. HENSHAW
 Full Name (Last, First, Middle Initial)
 Mailing Address 226 BRANDYWINE CIRCLE
 City ENGLEWOOD State FL Zip Code 34223-1955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2014
Transaction ID : SA11.3082811
 Amount of Each Receipt this Period
 225.00
 CONTRIBUTION

B. MRS. HANNAH JARSON
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 9304
 City RANCHO SANTA FE State CA Zip Code 92067-4304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2014
Transaction ID : SA11.3082711
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. MR. CHISWELL D. LANGHORNE JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1680 31ST STREET NW
 City WASHINGTON State DC Zip Code 20007-2924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer K.Y. RIVER PROPERTIES Occupation EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 10 / 2014
Transaction ID : SA11.3082863
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1475.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

A. MRS. DIANE M. MENDEZ-PADEFORD
 Full Name (Last, First, Middle Initial)
 Mailing Address 18104 S. SUMMER AVENUE
 City State Zip Code
 ARTESIA CA 90701-3913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOMEMAKER HOMEMAKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11.3082400
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. MR. JAMES B. NICHOLSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 10900 HARPER AVENUE
 City State Zip Code
 DETROIT MI 48213-3364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 P.V.S. CHEMICALS, INC. PRESIDENT & CHIEF EXECUTIVE OFFICER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2014
Transaction ID : SA11.3082384
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

C. MR. DICK POLLARD
 Full Name (Last, First, Middle Initial)
 Mailing Address 6609 NORFOLK AVENUE
 City State Zip Code
 LUBBOCK TX 79413-5902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 POLLARD FRIENDLY FORD AUTO DEALER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2014
Transaction ID : SA11.3082729
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6000.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 9 OF 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. MICHAEL A. SANDIFER

Mailing Address 2145 DENNIS STREET

City Jacksonville State FL Zip Code 32204-1805

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

Name of Employer CAIN & BULTMAN INC. Occupation C.E.O. & CHAIRMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 05 / 2014
Transaction ID : SA11.3082767

Amount of Each Receipt this Period 500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. JACK SCHEWEL

Mailing Address 523 CLAY STREET

City Lynchburg State VA Zip Code 24504-2445

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11.3082669

Amount of Each Receipt this Period 500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. THOMAS J. SMITH

Mailing Address 4951 COUNTY ROAD 6

City Bishop State TX Zip Code 78343-5074

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

Name of Employer SELF-EMPLOYED Occupation FARMING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 04 / 2014
Transaction ID : SA11.3082712

Amount of Each Receipt this Period 300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 29
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. FRIENDS OF JOHN MCCAIN		Date of Receipt MM / DD / YYYY 01 / 15 / 2014 Transaction ID : SA11.3082365
Mailing Address 228 SOUTH WASHINGTON STREET SUITE 115		Amount of Each Receipt this Period 5000.00
City ALEXANDRIA	State VA	Zip Code 22314-5404
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. GENERAL DYNAMICS CORPORATION PAC		Date of Receipt MM / DD / YYYY 01 / 30 / 2014 Transaction ID : SA11.3082386
Mailing Address 2941 FAIRVIEW PARK DRIVE SUITE 100		Amount of Each Receipt this Period 1000.00
City FALLS CHURCH	State VA	Zip Code 22042-4541
FEC ID number of contributing federal political committee. C C00078451	CONTRIBUTION	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. GENERAL ELECTRIC COMPANY PAC		Date of Receipt MM / DD / YYYY 02 / 07 / 2014 Transaction ID : SA11.3082641
Mailing Address 1299 PENNSYLVANIA AVE. NW, STE. 90		Amount of Each Receipt this Period 1000.00
City WASHINGTON	State DC	Zip Code 20004-2400
FEC ID number of contributing federal political committee. C C00024869	CONTRIBUTION	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	7000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 OF 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. DERBY H WATKINS

Mailing Address 16301 KELLY WOODS DR

City State Zip Code
FT MYERS FL 33908

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15422.65

Date of Receipt
M M / D D / Y Y Y Y
01 / 06 / 2014

Transaction ID : SA17.1

Amount of Each Receipt this Period
15422.65

LIST RENTAL INCOME

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	15422.65
TOTAL This Period (last page this line number only).....▶	15422.65

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. DERBY H WATKINS

Mailing Address 16301 KELLY WOODS DR

City State Zip Code
FT MYERS FL 33908

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 06 / 2014

Transaction ID : SB21.19

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. BANKCARD CENTER

Mailing Address PO BOX 569200

City State Zip Code
DALLAS TX 75356

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2014

Transaction ID : SB21.13

Amount of Each Disbursement this Period

2070.16

Full Name (Last, First, Middle Initial)

C. AMTRAK

Mailing Address PO BOX 2464

City State Zip Code
WASHINGTON DC 20013

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2014

Transaction ID : SB21.104

Amount of Each Disbursement this Period

696.00

[MEMO ITEM]

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

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

5070.16

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. AT&T MOBILITY

Mailing Address PO BOX 6463

City CAROL STREAM State IL Zip Code 60197

Purpose of Disbursement
PHONE SVC

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2014

Transaction ID : SB21.102

Amount of Each Disbursement this Period

933.45

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. EFAX

Mailing Address 6922 HOLLYWOOD BLVD

City LOS ANGELES State CA Zip Code 90028

Purpose of Disbursement
PHONE SVC

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2014

Transaction ID : SB21.101

Amount of Each Disbursement this Period

10.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MACNAIR TRAVEL AGENCY

Mailing Address 4100 FAIRFAX DR STE 600

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2014

Transaction ID : SB21.103

Amount of Each Disbursement this Period

70.00

[MEMO ITEM]

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		31		2014

Transaction ID : SB21.105

Amount of Each Disbursement this Period

360.71

[MEMO ITEM]

B. BANKCARD CENTER

Mailing Address PO BOX 569200

City DALLAS State TX Zip Code 75356

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2014

Transaction ID : SB21.14

Amount of Each Disbursement this Period

168.35

C. AMTRAK

Mailing Address PO BOX 2464

City WASHINGTON State DC Zip Code 20013

Purpose of Disbursement
CREDIT-TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2014

Transaction ID : SB21.107

Amount of Each Disbursement this Period

-375.00

[MEMO ITEM]

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

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

168.35

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. EFAX

Mailing Address 6922 HOLLYWOOD BLVD

City LOS ANGELES State CA Zip Code 90028

Purpose of Disbursement
PHONE SVC

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	07	/	2014

Transaction ID : SB21.109

Amount of Each Disbursement this Period

10.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MACNAIR TRAVEL AGENCY

Mailing Address 4100 FAIRFAX DR STE 600

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	07	/	2014

Transaction ID : SB21.110

Amount of Each Disbursement this Period

70.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. OMNI BERKSHIRE

Mailing Address 21 E 52ND ST

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	07	/	2014

Transaction ID : SB21.108

Amount of Each Disbursement this Period

463.35

[MEMO ITEM]

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. BANKCARD CENTER

Mailing Address PO BOX 569200

City DALLAS State TX Zip Code 75356

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 06 / 2014

Transaction ID : SB21.15

Amount of Each Disbursement this Period

1866.29

Full Name (Last, First, Middle Initial)

B. AT&T MOBILITY

Mailing Address PO BOX 6463

City CAROL STREAM State IL Zip Code 60197

Purpose of Disbursement
PHONE SVC

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 06 / 2014

Transaction ID : SB21.112

Amount of Each Disbursement this Period

900.17

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CAREY INTERNATIONAL INC

Mailing Address 4530 WISCONSIN AVE NW

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 06 / 2014

Transaction ID : SB21.113

Amount of Each Disbursement this Period

966.12

[MEMO ITEM]

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

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

1866.29

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. BANKCARD CENTER

Mailing Address PO BOX 569200

City DALLAS State TX Zip Code 75356

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2014

Transaction ID : SB21.16

Amount of Each Disbursement this Period

945.53

Full Name (Last, First, Middle Initial)

B. AT&T MOBILITY

Mailing Address PO BOX 6463

City CAROL STREAM State IL Zip Code 60197

Purpose of Disbursement
PHONE SVC

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2014

Transaction ID : SB21.115

Amount of Each Disbursement this Period

680.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. JOHNNY'S HALF SHELL

Mailing Address 400 N CAPITOL ST

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
FACILITY RENTAL/CATERING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2014

Transaction ID : SB21.116

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

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

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

945.53

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. MACNAIR TRAVEL AGENCY

Mailing Address 4100 FAIRFAX DR STE 600

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21.117

Amount of Each Disbursement this Period

65.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 N ST ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 06 / 2014

Transaction ID : SB21.26

Amount of Each Disbursement this Period

1273.75

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N ST ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 10 / 2014

Transaction ID : SB21.27

Amount of Each Disbursement this Period

2062.06

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

3335.81

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. CAMPAIGN SOLUTIONS

Mailing Address 117 N ST ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
VOID-WEB SERVICE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 06 / 2014

Transaction ID : SB21.28

Amount of Each Disbursement this Period

-412.06

Full Name (Last, First, Middle Initial)

B. CAPLIN & DRYSDALE

Mailing Address ONE THOMAS CIR NW STE 1100

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 07 / 2014

Transaction ID : SB21.20

Amount of Each Disbursement this Period

245.00

Full Name (Last, First, Middle Initial)

C. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2014

Transaction ID : SB21.1

Amount of Each Disbursement this Period

18.88

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

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

-148.18

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SB21.2

Amount of Each Disbursement this Period

12.02

Full Name (Last, First, Middle Initial)

B. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2014

Transaction ID : SB21.3

Amount of Each Disbursement this Period

31.07

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL RD

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
DATABASE MANAGEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2014

Transaction ID : SB21.17

Amount of Each Disbursement this Period

1920.00

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

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

1963.09

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
DATABASE MANAGEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2014

Transaction ID : SB21.18

Amount of Each Disbursement this Period

2356.62

Full Name (Last, First, Middle Initial)

B. CT CORPORATION

Mailing Address PO BOX 4349

City CAROL STREAM State IL Zip Code 60197

Purpose of Disbursement
SUBSCRIPTIONS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 16 / 2014

Transaction ID : SB21.24

Amount of Each Disbursement this Period

207.32

Full Name (Last, First, Middle Initial)

C. EDONATION

Mailing Address 117 NORTH ST ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2014

Transaction ID : SB21.8

Amount of Each Disbursement this Period

199.14

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

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

2763.08

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. EDONATION

Mailing Address 117 NORTH ST ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2014

Transaction ID : SB21.9

Amount of Each Disbursement this Period

34.43

Full Name (Last, First, Middle Initial)

B. ELAVON

Mailing Address 1 CONCOURSE PKWY

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 02 / 2014

Transaction ID : SB21.10

Amount of Each Disbursement this Period

52.99

Full Name (Last, First, Middle Initial)

C. ELAVON

Mailing Address 1 CONCOURSE PKWY

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2014

Transaction ID : SB21.11

Amount of Each Disbursement this Period

52.99

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

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

140.41

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ELAVON

Mailing Address 1 CONCOURSE PKWY

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2014

Transaction ID : SB21.12

Amount of Each Disbursement this Period

52.99

Full Name (Last, First, Middle Initial)

B. HOON DESIGNS LLC

Mailing Address 2800 SHIRLINGTON RD STE 920

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 06 / 2014

Transaction ID : SB21.22

Amount of Each Disbursement this Period

1400.00

Full Name (Last, First, Middle Initial)

C. HUCKABY DAVIS LISKER

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 07 / 2014

Transaction ID : SB21.4

Amount of Each Disbursement this Period

626.85

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

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

2079.84

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. HUCKABY DAVIS LISKER

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	12	/	2014

Transaction ID : SB21.5

Amount of Each Disbursement this Period

624.40

Category/
Type

Full Name (Last, First, Middle Initial)

B. INTERNAL REVENUE SERVICE

Mailing Address 400 N EIGHTH ST

City RICHMOND State VA Zip Code 23219

Purpose of Disbursement
TAXES

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	08	/	2014

Transaction ID : SB21.29

Amount of Each Disbursement this Period

100777.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. SOUTHWEST PUBLISHING

Mailing Address 2600 NW TOPEKA BLVD

City TOPEKA State KS Zip Code 66617

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	12	/	2014

Transaction ID : SB21.21

Amount of Each Disbursement this Period

5161.09

Category/
Type

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

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

106562.49

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. SOUTHWEST PUBLISHING

Mailing Address 2600 NW TOPEKA BLVD

City TOPEKA State KS Zip Code 66617

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 06 / 2014

Transaction ID : SB21.23

Amount of Each Disbursement this Period

6269.32

Full Name (Last, First, Middle Initial)

B. YUMA SOLUTIONS INC

Mailing Address PO BOX 152075

City TAMPA State FL Zip Code 33684

Purpose of Disbursement
COMPUTER SUPPORT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 03 / 2014

Transaction ID : SB21.6

Amount of Each Disbursement this Period

496.00

Full Name (Last, First, Middle Initial)

C. YUMA SOLUTIONS INC

Mailing Address PO BOX 152075

City TAMPA State FL Zip Code 33684

Purpose of Disbursement
COMPUTER SUPPORT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21.7

Amount of Each Disbursement this Period

1187.00

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

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

7952.32

132699.19

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ANDREW WALTER FOR CONGRESS

Mailing Address PO BOX 13321

City TEMPE State AZ Zip Code 85284

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name

ANDREW WALTER

Office Sought: House
 Senate
 President

State: AZ District: 09

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB23.1

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. ANDY TOBIN FOR CONGRESS

Mailing Address 2532 N 4TH ST

City FLAGSTAFF State AZ Zip Code 86004

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name

ANDY TOBIN

Office Sought: House
 Senate
 President

State: AZ District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB23.2

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. DR MONICA WEHBY FOR US SENATE

Mailing Address PO BOX 3375

City PORTLAND State OR Zip Code 97208

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name

DR MONICA WEHBY

Office Sought: House
 Senate
 President

State: OR District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB23.3

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0

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

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

6	0	0	0	0	0	0	0	0	0

6	0	0	0	0	0	0	0	0	0

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ED GILLESPIE FOR SENATE

Mailing Address PO BOX 71596

City RICHMOND State VA Zip Code 23225

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name
ED GILLESPIE

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: VA District:

Date of Disbursement

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

Transaction ID : SB23.4

Amount of Each Disbursement this Period

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

B. MCFADDEN FOR SENATE

Mailing Address PO BOX 4039

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name
MIKE MCFADDEN

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MN District:

Date of Disbursement

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

Transaction ID : SB23.5

Amount of Each Disbursement this Period

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

C. SULLIVAN FOR US SENATE

Mailing Address 3705 ARCTIC BLVD

City ANCHORAGE State AK Zip Code 99503

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name
DAN SULLIVAN

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: AK District:

Date of Disbursement

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

Transaction ID : SB23.6

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

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

7	5	0	0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

7	5	0	0	.	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. THOM TILLIS COMMITTEE

Mailing Address PO BOX 2489

City State Zip Code
CORNELIUS NC 28031

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name
THOM TILLIS

Office Sought: House
 Senate
 President
State: NC District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB23.7

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

2500.00

16000.00