

# 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  /  /  in the State of

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

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

Election on  /  /  in the State of

5. Covering Period

/  /

through

/  /

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

/  /

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								
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**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))....	143967.73	399542.73
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	143967.73	399542.73
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	56822.17	162509.02
(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)).....	56822.17	161233.02
8. Cash on Hand at Close of Reporting Period (from Line 27).....	478547.34	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	538000.00	

**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:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	55025.00	248725.00
(ii) Unitemized.....	3366.00	10741.00
(iii) TOTAL of contributions from individuals ▶	58391.00	259466.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	85500.00	140000.00
(d) The Candidate.....	76.73	76.73
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	143967.73	399542.73
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	1276.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	143967.73	400818.73

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	56822.17	162509.02
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	10500.00	15500.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	67322.17	178009.02

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	401901.78
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	143967.73
25. SUBTOTAL (add Line 23 and Line 24).....	545869.51
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	67322.17
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	478547.34

**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 72
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Liane G. Beardsley**

Mailing Address 927 Forest Rd

City Lancaster State PA Zip Code 17601

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

Name of Employer US Boiler Co Occupation Cost Accountant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2013

**Transaction ID : SA11AI.5459**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. William C. Beecherl**

Mailing Address 3818 Shenandoah St

City Dallas State TX Zip Code 75205

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

Name of Employer Verdad Energy Occupation Petro Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 13 / 2013

**Transaction ID : SA11AI.5461**

Amount of Each Receipt this Period  
 2600.00

**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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2013

**Transaction ID : SA11AI.5463**

Amount of Each Receipt this Period  
 500.00

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

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

3600.00

**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 72
	<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. L. Tate Christensen**

Mailing Address 675 Cedar Canyon Rd

City Crawford State TX Zip Code 76638

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

Name of Employer Barsh Company Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 05 / 2013

**Transaction ID : SA11AI.5465**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 1530 North Key Blvd #523

City Arlington State VA Zip Code 22209

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

Name of Employer Congressional Solutions Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : SA11AI.5467**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Renell Carter Dubay**

Mailing Address 1713 Starling Dr

City College Station State TX Zip Code 77845

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

Name of Employer Kay Perrone and Associates, P.C. Occupation Staff Accountant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : SA11AI.5468**

Amount of Each Receipt this Period  
 250.00

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

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

1250.00

**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 72
	<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)  
**J. Thomas Echols**

Mailing Address PO Box 709

City Breckenridge State TX Zip Code 76424

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

Name of Employer Self Employed Occupation Vet

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  
 06 / 22 / 2013

**Transaction ID : SA11AI.5470**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 8004 Woodway Dr Ste 100

City Woodway State TX Zip Code 76712

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

Name of Employer Independent Bank Group 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 Y Y  
 04 / 05 / 2013

**Transaction ID : SA11AI.5472**

Amount of Each Receipt this Period  
500.00

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

Mailing Address PO Box 1083

City Houston State TX Zip Code 77251

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 05 / 2013

**Transaction ID : SA11AI.5474**

Amount of Each Receipt this Period  
2600.00

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

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

3350.00

**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 72
	<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. Cherie Flores**

Mailing Address PO Box 1083

City Houston State TX Zip Code 77251

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 08 / 2013

**Transaction ID : SA11AI.5475**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James C. Flores**

Mailing Address PO Box 1083

City Houston State TX Zip Code 77251

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

Name of Employer Plains Exploration & Production Compan Occupation Chairman and CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 08 / 2013

**Transaction ID : SA11AI.5477**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address PO Box 1083

City Houston State TX Zip Code 77251

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

Name of Employer Plains Exploration & Production Compan Occupation Chairman and CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 08 / 2013

**Transaction ID : SA11AI.5478**

Amount of Each Receipt this Period  
2600.00

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

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

7800.00



**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 72
	<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

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2013

**Transaction ID : SA11AI.5480**

Amount of Each Receipt this Period  
 430.00

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

Mailing Address 8402 New England Dr

City Amarillo State TX Zip Code 79119

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 04 / 2013

**Transaction ID : SA11AI.5482**

Amount of Each Receipt this Period  
 435.00

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

Mailing Address 8402 New England Dr

City Amarillo State TX Zip Code 79119

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 05 / 2013

**Transaction ID : SA11AI.5483**

Amount of Each Receipt this Period  
 435.00

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

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

1300.00

**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 72
	<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. Kirk Goldman**

Mailing Address 3342 Desert Inn Dr

City State Zip Code  
Montgomery TX 77356

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

Name of Employer Occupation  
Continental Airlines Pilot

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2013

**Transaction ID : SA11AI.5484**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James C. Grimm**

Mailing Address 595 Round Rock West Dr Ste 305

City State Zip Code  
Round Rock TX 78681

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

Name of Employer Occupation  
Texas Poultry Federation Exec. Vice President

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  
 06 / 03 / 2013

**Transaction ID : SA11AI.5486**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 4320 Valley Ridge Rd

City State Zip Code  
Dallas TX 75220

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

Name of Employer Occupation  
Gruber, Hurst, Johansen & Hail Attorney

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  
 05 / 18 / 2013

**Transaction ID : SA11AI.5488**

Amount of Each Receipt this Period  
500.00

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

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

900.00

**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 72
	<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. David Hicks**

Mailing Address 5475 Blue Ridge Dr

City	State	Zip Code
College Station	TX	77845

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

Name of Employer	Occupation
TAMU Foundation	Asst. VP for College Programs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11AI.5490**

Amount of Each Receipt this Period

250.00

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

Mailing Address 3024 Hickory Ridge Cir

City	State	Zip Code
Bryan	TX	77807

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

Name of Employer	Occupation
Texas A&M	Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : SA11AI.5491**

Amount of Each Receipt this Period

1600.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas L. Johnson**

Mailing Address 4105 Shimmering Cv

City	State	Zip Code
Austin	TX	78731

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

Name of Employer	Occupation
AGC	Lobbyist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2013

**Transaction ID : SA11AI.5493**

Amount of Each Receipt this Period

2600.00

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

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

4450.00

**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 72
	<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. Richard Kardys**

Mailing Address 103 Cave Lane

City San Antonio State TX Zip Code 78209

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

Name of Employer Frost National Bank Occupation banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 22 / 2013

**Transaction ID : SA11AI.5495**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 2825 Oak Lawn Ave Unit 192667

City Dallas State TX Zip Code 75219

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

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 08 / 2013

**Transaction ID : SA11AI.5497**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Alex B. Kenton**

Mailing Address 55 Westelm Cir

City San Antonio State TX Zip Code 78230

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

Name of Employer Mednax Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 06 / 2013

**Transaction ID : SA11AI.5499**

Amount of Each Receipt this Period  
 2600.00

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

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

4600.00

**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 72
	<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)  
**Weldon D. Kruger**

Mailing Address 9315 Whitney Ln

City State Zip Code  
College Station TX 77845

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  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : SA11AI.5500**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 210 Daybreak Way

City State Zip Code  
Mc Gregor TX 76657

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

Name of Employer Occupation  
Capstone Mechanical Senior Vice President

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  
 04 / 05 / 2013

**Transaction ID : SA11AI.5502**

Amount of Each Receipt this Period  
500.00

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

Mailing Address PO Box 1175

City State Zip Code  
Waco TX 76703

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

Name of Employer Occupation  
M. Lipsitz and Company, LTD Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2013

**Transaction ID : SA11AI.5504**

Amount of Each Receipt this Period  
2600.00

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

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

4100.00

**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 72
	<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. Melvin Lipsitz**

Mailing Address PO Box 1175

City State Zip Code  
Waco TX 76703

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

Name of Employer Occupation  
M. Lipsitz and Company, LTD Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 22 / 2013

**Transaction ID : SA11AI.5505**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 601 Contour Dr

City State Zip Code  
San Antonio TX 78212

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

Name of Employer Occupation  
Homemaker Homemaker

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  
06 / 03 / 2013

**Transaction ID : SA11AI.5507**

Amount of Each Receipt this Period  
2000.00

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

Mailing Address PO Box Bh003

City State Zip Code  
San Antonio TX 78201

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

Name of Employer Occupation  
Self Employed Businessman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 03 / 2013

**Transaction ID : SA11AI.5508**

Amount of Each Receipt this Period  
1500.00

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

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

6100.00

**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 72
	<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) <b>Mr. L. Charles Neely Jr.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 03 / 2013
Mailing Address 610 Bentley Mnr		<b>Transaction ID : SA11AI.5510</b>
City Shavano Park	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer San Antonio Steel Co.	Occupation Merchant	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) <b>Mr. Othel M. Neely</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2013
Mailing Address 1620f W Loop 340		<b>Transaction ID : SA11AI.5511</b>
City Waco	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 525.00	

Full Name (Last, First, Middle Initial) <b>Carl F. Raba Jr.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 26 / 2013
Mailing Address PO Box 690287		<b>Transaction ID : SA11AI.5513</b>
City San Antonio	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Raba-Kistner Consultants, Inc.	Occupation Engineer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3525.00
<b>TOTAL</b> 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: PAGE 16 OF 72  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Linda C. Raun**

Mailing Address 311 Avenue A

City State Zip Code  
El Campo TX 77437

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

Name of Employer Occupation  
Rice Producers Group Executive Committee member

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 22 / 2013

**Transaction ID : SA11AI.5515**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 437 Chimney Hill Dr

City State Zip Code  
College Station TX 77840

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

Name of Employer Occupation  
Texas A&M Foundation Director of Development

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2013

**Transaction ID : SA11AI.5517**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Scott A. Stanger**

Mailing Address 9619 Oak Springs Dr

City State Zip Code  
Woodway TX 76712

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

Name of Employer Occupation  
Capstone Mechanical Vice President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 05 / 2013

**Transaction ID : SA11AI.5519**

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 17 OF 72
	<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)  
**Richard Startzman**

Mailing Address 2009 Oakwood Trl

City State Zip Code  
College Station TX 77845

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  
1050.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11AI.5520**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 1111 Royal Adelaide Dr

City State Zip Code  
College Station TX 77845

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

Name of Employer Occupation  
Homemaker Homemaker

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  
 06 / 30 / 2013

**Transaction ID : SA11AI.5522**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 119 Turtle Point Rd

City State Zip Code  
Tuxedo Park NY 10987

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

Name of Employer Occupation  
Best Efforts Best Efforts

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2013

**Transaction ID : SA11AI.5524**

Amount of Each Receipt this Period  
2600.00

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

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

3150.00

**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 72
	<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. Barbara Swanson**

Mailing Address 119 Turtle Point Rd

City Tuxedo Park State NY Zip Code 10987

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

Name of Employer Best Efforts Occupation Best Efforts

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2013

**Transaction ID : SA11AI.5525**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Robert E. Swanson**

Mailing Address 119 Turtle Point Rd

City Tuxedo Park State NY Zip Code 10987

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

Name of Employer Ridgewood Energy Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2013

**Transaction ID : SA11AI.5527**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Robert E. Swanson**

Mailing Address 119 Turtle Point Rd

City Tuxedo Park State NY Zip Code 10987

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

Name of Employer Ridgewood Energy Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2013

**Transaction ID : SA11AI.5528**

Amount of Each Receipt this Period  
2600.00

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

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

7800.00

**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 72
	<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) <b>A. Jere W. Thompson Sr.</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2013	
Mailing Address 2913 Fairmount St Ste 100		<b>Transaction ID : SA11AI.5530</b>	
City State Zip Code Dallas TX 75201	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. <b>C</b>	Name of Employer Occupation Retired Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. David Topp</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2013	
Mailing Address 16444 Old Richmond Rd		<b>Transaction ID : SA11AI.5531</b>	
City State Zip Code Sugar Land TX 77498	Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. <b>C</b>	Name of Employer Occupation Sunray Operating, LLC Oil & Gas Exploration/Production		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 400.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Ellis E. Tredway</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 03 / 2013	
Mailing Address 13013 Partridge Bend Dr		<b>Transaction ID : SA11AI.5533</b>	
City State Zip Code Austin TX 78729	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. <b>C</b>	Name of Employer Occupation Student Loan PAC Executive Vice President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1100.00
<b>TOTAL</b> 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 20 OF 72
	<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)  
**Murray Watson Jr.**

Mailing Address 2600 Washington Ave

City State Zip Code  
Waco TX 76710

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  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 03 / 2013

**Transaction ID : SA11AI.5535**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 79 Pascal Ln

City State Zip Code  
Austin TX 78746

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

Name of Employer Occupation  
Winstead PC Attorney

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  
06 / 06 / 2013

**Transaction ID : SA11AI.5537**

Amount of Each Receipt this Period  
500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

55025.00

**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 72
	<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)  
**Action Committee for Rural Electrification**

Mailing Address 4301 Wilson Blvd

City State Zip Code  
Arlington VA 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  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11C.5638**

Amount of Each Receipt this Period  
1000.00

**B.** 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  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 03 / 2013

**Transaction ID : SA11C.5639**

Amount of Each Receipt this Period  
3000.00

**C.** Full Name (Last, First, Middle Initial)  
**Aircraft Owners and Pilots Assoc**

Mailing Address 421 Aviation Way

City State Zip Code  
Frederick MD 21701

FEC ID number of contributing federal political committee. **C** C70004585

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 Y  
 06 / 28 / 2013

**Transaction ID : SA11C.5640**

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 22 OF 72
	<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)  
**Allergan Inc. PAC for Employees**

Mailing Address 2148 E Orangeview Ln

City Orange State CA Zip Code 92867

FEC ID number of contributing federal political committee. **C** C00292102

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  
 06 / 03 / 2013

**Transaction ID : SA11C.5641**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**Allied Pilots Association PAC**

Mailing Address 14600 Trinity Blvd Ste 500

City Fort Worth State TX Zip Code 76155

FEC ID number of contributing federal political committee. **C** C00267849

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  
 06 / 30 / 2013

**Transaction ID : SA11C.5642**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 1101 17th St NW Ste 600

City Washington State DC Zip Code 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

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 22 / 2013

**Transaction ID : SA11C.5643**

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 23 OF 72
	<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 Meat Institute PAC**

Mailing Address 1150 Connecticut Ave NW 12th Floor

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00024281**

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  
 06 / 13 / 2013

**Transaction ID : SA11C.5644**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**American Petroleum Institute PAC**

Mailing Address 1220 L St NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00483677**

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  
 05 / 06 / 2013

**Transaction ID : SA11C.5645**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Anadarko Petroleum Corp PAC**

Mailing Address 1201 Lake Robbins Dr

City The Woodlands State TX Zip Code 77380

FEC ID number of contributing federal political committee. **C C00231951**

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  
 06 / 13 / 2013

**Transaction ID : SA11C.5646**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

**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 72
	<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	

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)  
**BILL FLORES FOR CONGRESS**

**A. Associated Builders & Contractors PAC**

Full Name (Last, First, Middle Initial)  
Associated Builders & Contractors PAC

Mailing Address 4250 Fairfax Dr Ste 900

City State Zip Code  
Arlington VA 22203

FEC ID number of contributing federal political committee. **C** C00010421

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 Y Y  
 06 / 24 / 2013

**Transaction ID : SA11C.5647**

Amount of Each Receipt this Period  
2500.00

**B. Cabot Oil & Gas PAC**

Full Name (Last, First, Middle Initial)  
Cabot Oil & Gas PAC

Mailing Address PO Box 4544

City State Zip Code  
Houston TX 77210

FEC ID number of contributing federal political committee. **C** C00243865

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 Y Y  
 06 / 30 / 2013

**Transaction ID : SA11C.5648**

Amount of Each Receipt this Period  
1000.00

**C. Cargill, Incorporated PAC**

Full Name (Last, First, Middle Initial)  
Cargill, Incorporated PAC

Mailing Address PO Box 9300

City State Zip Code  
Minneapolis MN 55440

FEC ID number of contributing federal political committee. **C** C00067884

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  
 06 / 30 / 2013

**Transaction ID : SA11C.5649**

Amount of Each Receipt this Period  
2000.00

**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 25 OF 72
	<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)  
**Center for Coastal Conservation PAC**

Mailing Address 701 8th St NW Ste 500

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00435024

Name of Employer Center for Coastal Conservation	Occupation President
---	-------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2013

**Transaction ID : SA11C.5650**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Chevron Employees Fed PAC**

Mailing Address PO Box 6016

City San Ramon	State CA	Zip Code 94583
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00035006

Name of Employer	Occupation
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Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2013

**Transaction ID : SA11C.5651**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Committee for Advancement of Cotton**

Mailing Address PO Box 2995

City Cordova	State TN	Zip Code 38088
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FEC ID number of contributing federal political committee. **C** C00023028

Name of Employer	Occupation
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Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11C.5652**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

**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 72
	<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)  
**Conoco Phillips Spirit PAC**

Mailing Address 720 N. PLAZA OFFICE BUILDING

City State Zip Code  
BARTLESVILLE OK 74004

FEC ID number of contributing federal political committee. **C C00112896**

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  
 05 / 06 / 2013

**Transaction ID : SA11C.5654**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Conoco Phillips Spirit PAC**

Mailing Address 720 N. PLAZA OFFICE BUILDING

City State Zip Code  
BARTLESVILLE OK 74004

FEC ID number of contributing federal political committee. **C C00112896**

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 Y  
 06 / 30 / 2013

**Transaction ID : SA11C.5656**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 333 W Sheridan Ave

City State Zip Code  
Oklahoma City OK 73102

FEC ID number of contributing federal political committee. **C C00354753**

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 Y  
 05 / 06 / 2013

**Transaction ID : SA11C.5657**

Amount of Each Receipt this Period  
2500.00

**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 27 OF 72
	<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. Deloitte Federal Political Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 365

City Washington State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C C00211318**

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  
 05 / 06 / 2013

**Transaction ID : SA11C.5658**

Amount of Each Receipt this Period  
 3000.00

**B. DSC PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 6390 LBJ Fwy Ste 108

City Dallas State TX Zip Code 75240

FEC ID number of contributing federal political committee. **C C00356477**

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  
 05 / 06 / 2013

**Transaction ID : SA11C.5659**

Amount of Each Receipt this Period  
 1000.00

**C. Ernst & Young PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1101 New York Ave NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00227744**

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  
 05 / 06 / 2013

**Transaction ID : SA11C.5660**

Amount of Each Receipt this Period  
 2000.00

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

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

6000.00

**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 72
	<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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2013

**Transaction ID : SA11C.5661**

Amount of Each Receipt this Period  
 5000.00

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

Mailing Address 5959 Las Colinas Blvd, Suite 3150

City Irving State TX Zip Code 75039

FEC ID number of contributing federal political committee. **C** C00095406

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  
 06 / 22 / 2013

**Transaction ID : SA11C.5663**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Exxon Mobil Corporation PAC**

Mailing Address 325 Pennsylvania Ave SE # 280

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00121368

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  
 05 / 06 / 2013

**Transaction ID : SA11C.5662**

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 29 OF 72
	<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)  
**Halliburton Company PAC**

Mailing Address 1150 18th St NW Ste 200

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00035691**

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  
 05 / 06 / 2013

**Transaction ID : SA11C.5664**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Health Care Service Corporation Employees PAC**

Mailing Address 300 E Randolph St

City Chicago State IL Zip Code 60601

FEC ID number of contributing federal political committee. **C C00199711**

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  
 06 / 13 / 2013

**Transaction ID : SA11C.5665**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 1700 Rio Grande St Ste 100

City Austin State TX Zip Code 78701

FEC ID number of contributing federal political committee. **C C00332841**

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  
 05 / 06 / 2013

**Transaction ID : SA11C.5666**

Amount of Each Receipt this Period  
 1000.00

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

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

3500.00

**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 72
	<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)  
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 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 22 / 2013

**Transaction ID : SA11C.5667**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 1201 15th St NW Ste 300

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00246306

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  
 05 / 06 / 2013

**Transaction ID : SA11C.5668**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 600 14th St NW Ste 800

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00236489

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  
 06 / 30 / 2013

**Transaction ID : SA11C.5669**

Amount of Each Receipt this Period  
 2500.00

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

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

6000.00

**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 31 OF 72
	<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)  
**KPMG PAC**

Mailing Address PO Box 18254

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00280222

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  
 05 / 06 / 2013

**Transaction ID : SA11C.5670**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address PO Box 18254

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00280222

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2013

**Transaction ID : SA11C.5671**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Locke Lord Bissell & Liddell LLP PAC**

Mailing Address 600 Travis St Ste 2800

City Houston State TX Zip Code 77002

FEC ID number of contributing federal political committee. **C** C00117861

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 Y Y  
 06 / 22 / 2013

**Transaction ID : SA11C.5672**

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 32 OF 72
	<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)  
**NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE**

Mailing Address 430 NORTH MICHIGAN AVENUE

City State Zip Code  
CHICAGO IL 60611

FEC ID number of contributing federal political committee. **C** C00030718

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  
 06 / 30 / 2013

**Transaction ID : SA11C.5701**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1101 King St Ste 600

City State Zip Code  
Alexandria VA 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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2013

**Transaction ID : SA11C.5673**

Amount of Each Receipt this Period  
 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**National Cattlemen's Beef Association PAC**

Mailing Address 9110 E Nichols Ave

City State Zip Code  
Centennial CO 80112

FEC ID number of contributing federal political committee. **C** C00028787

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  
 06 / 13 / 2013

**Transaction ID : SA11C.5674**

Amount of Each Receipt this Period  
 2000.00

**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 33 OF 72
	<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) <b>A. National Chicken Council PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 03 / 2013	
Mailing Address 1015 15th St NW		<b>Transaction ID : SA11C.5675</b>	
City Washington	State DC	Zip Code 20005	
FEC ID number of contributing federal political committee. C C00034272		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 1000.00	

Full Name (Last, First, Middle Initial) <b>B. National Chicken Council PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2013	
Mailing Address 1015 15th St NW		<b>Transaction ID : SA11C.5676</b>	
City Washington	State DC	Zip Code 20005	
FEC ID number of contributing federal political committee. C C00034272		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 2000.00	

Full Name (Last, First, Middle Initial) <b>C. National Ocean Industries Association PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 03 / 2013	
Mailing Address 1120 G St NW Ste 900		<b>Transaction ID : SA11C.5677</b>	
City Washington	State DC	Zip Code 20005	
FEC ID number of contributing federal political committee. C C00409565		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 3500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4500.00
<b>TOTAL</b> 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 34 OF 72
	<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	

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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**National Turkey Federation PAC**

Mailing Address 1225 New York Ave NW Ste 400

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00076182**

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  
 06 / 22 / 2013

**Transaction ID : SA11C.5678**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Nucor Political Action Committee**

Mailing Address 1915 Rexford Rd

City Charlotte State NC Zip Code 28211

FEC ID number of contributing federal political committee. **C C00379628**

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  
 06 / 22 / 2013

**Transaction ID : SA11C.5679**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 19003 Ih 10 W

City San Antonio State TX Zip Code 78257

FEC ID number of contributing federal political committee. **C C00435321**

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  
 06 / 30 / 2013

**Transaction ID : SA11C.5680**

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 35 OF 72
	<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	

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)  
**BILL FLORES FOR CONGRESS**

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

Mailing Address 10889 Wilshire Blvd

City Los Angeles State CA Zip Code 90024

FEC ID number of contributing federal political committee. **C** C00083857

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  
 05 / 06 / 2013

**Transaction ID : SA11C.5681**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address PO Box 10383

City Des Moines State IA Zip Code 50306

FEC ID number of contributing federal political committee. **C** C00201871

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  
 06 / 13 / 2013

**Transaction ID : SA11C.5682**

Amount of Each Receipt this Period  
 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Power PAC of Luminant Holding Company**

Mailing Address 601 Pennsylvania Ave NW Ste 850

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00255950

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  
 06 / 22 / 2013

**Transaction ID : SA11C.5683**

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 36 OF 72
	<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. SuddenLink PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12444 Powerscourt Dr  
 City Des Peres State MO Zip Code 63131  
 FEC ID number of contributing federal political committee. **C** C00426601  
 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  
 05 / 13 / 2013  
**Transaction ID : SA11C.5684**  
 Amount of Each Receipt this Period  
 1000.00

**B. The Home Depot Inc. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1155 F St NW Ste 400  
 City Washington State DC Zip Code 20004  
 FEC ID number of contributing federal political committee. **C** C00284885  
 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  
 06 / 30 / 2013  
**Transaction ID : SA11C.5685**  
 Amount of Each Receipt this Period  
 5000.00

**C. Trinity Industries Employee PAC, Inc.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2525 N Stemmons Fwy Fl 5  
 City Dallas State TX Zip Code 75207  
 FEC ID number of contributing federal political committee. **C** C00268904  
 Name of Employer Occupation  
 Receipt For: 2010  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013  
**Transaction ID : SA11C.5686**  
 Amount of Each Receipt this Period  
 1000.00  
 Primary 2010 Debt Retirement

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

7000.00

**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 37 OF 72
	<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)  
**United Airlines Inc. PAC**

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666

FEC ID number of contributing federal political committee. **C** C00078261

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  
 06 / 13 / 2013

**Transaction ID : SA11C.5687**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 9800 Fredericksburg Rd

City San Antonio State TX Zip Code 78284

FEC ID number of contributing federal political committee. **C** C00164145

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  
 06 / 22 / 2013

**Transaction ID : SA11C.5688**

Amount of Each Receipt this Period  
 1000.00

**C.** 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

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11C.5689**

Amount of Each Receipt this Period  
 2500.00

**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 38 OF 72
	<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)  
**Zachry Construction Corporation Political Action Committee**

Mailing Address 310 S Saint Marys St Ste 2100

City San Antonio State TX Zip Code 78205

FEC ID number of contributing federal political committee. **C** C00048165

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  
 06 / 22 / 2013

**Transaction ID : SA11C.5690**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

85500.00

**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 39 OF 72
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" 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) <b>BILL FLORES</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 03 / 2013
Mailing Address PO BOX 6207		<b>Transaction ID : SA11D.5298</b>
City BRYAN	State TX	
FEC ID number of contributing federal political committee.	C H0TX17104	Amount of Each Receipt this Period 76.73
Name of Employer	Occupation	In-kind - Express Shipping
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 76.73	

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	76.73
<b>TOTAL</b> This Period (last page this line number only).....	76.73

**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 72	
	<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) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2013
Mailing Address PO Box 650448		Amount of Each Disbursement this Period 5903.50 <b>Transaction ID : SB17.5306</b>
City State Zip Code Dallas TX 75265-0448	Purpose of Disbursement Shipping, Airfare, Food & Bev, Storage, Donation, Fuel, Software Subscription (see below if itemized)	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. UPS</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2013
Mailing Address PO Box 7247-0244		Amount of Each Disbursement this Period 92.30 <b>Transaction ID : SB17.5306.0</b>
City State Zip Code Philadelphia PA 19170-0001	Purpose of Disbursement Express Shipping	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2013
Mailing Address PO Box 66100		Amount of Each Disbursement this Period 627.60 <b>Transaction ID : SB17.5306.1</b>
City State Zip Code Chicago IL 60666-0100	Purpose of Disbursement Airfare	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5903.50
<b>TOTAL</b> 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 72	
	<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) <b>A. Aaron's Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2013
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	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Transaction ID : SB17.5306.2 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. One Thirty Five Prime</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2013
Mailing Address 1201 Hewitt Dr.		Amount of Each Disbursement this Period 529.08
City Waco State TX Zip Code 76712	Purpose of Disbursement Food & Beverage	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Transaction ID : SB17.5306.3 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Brazos Moving and Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2013
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	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Transaction ID : SB17.5306.4 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 72			
	<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) <b>A. INTUIT</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2013
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 Subscription	Transaction ID : SB17.5306.5
Candidate Name <b>BILL FLORES FOR CONGRESS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: TX	District: 17	

Full Name (Last, First, Middle Initial) <b>B. Upstream Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2013
Mailing Address 1609 Shoal Creek Boulevard Suite 203		Amount of Each Disbursement this Period 2861.80
City Austin	State TX	
Zip Code 78701-1022	Purpose of Disbursement Website Hosting, Email Broadcast Services, Social Media Services, Donation Capture Fees	Transaction ID : SB17.5306.8
Candidate Name <b>BILL FLORES FOR CONGRESS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: TX	District: 17	

Full Name (Last, First, Middle Initial) <b>c. Cantina Marina</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2013
Mailing Address 600 Water Street		Amount of Each Disbursement this Period 410.00
City Washington	State DC	
Zip Code 20024	Purpose of Disbursement Food & Beverage	Transaction ID : SB17.5306.9
Candidate Name <b>BILL FLORES FOR CONGRESS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: TX	District: 17	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 72	
	<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) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2013
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 77.88
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement Meals	Transaction ID : SB17.5306.11
Candidate Name <b>BILL FLORES FOR CONGRESS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: TX	District: 17	

Full Name (Last, First, Middle Initial) <b>B. The Capital Grille</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2013
Mailing Address 601 Pennsylvania Ave. NW		Amount of Each Disbursement this Period 444.60
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Food & Beverage	Transaction ID : SB17.5306.12
Candidate Name <b>BILL FLORES FOR CONGRESS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: TX	District: 17	

Full Name (Last, First, Middle Initial) <b>c. Texas State Technical College Waco</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2013
Mailing Address 3801 Campus Dr		Amount of Each Disbursement this Period 300.00
City Bellmead	State TX	
Zip Code 76705	Purpose of Disbursement Refreshments	Transaction ID : SB17.5306.13
Candidate Name <b>BILL FLORES FOR CONGRESS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: TX	District: 17	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 44 OF 72			
	<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) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2013
Mailing Address PO Box 650448		Amount of Each Disbursement this Period 3208.07
City Dallas State TX Zip Code 75265-0448	Purpose of Disbursement Food & Bev, Fuel, Meals, Storage, Software, Website, Email Comm...(see below if itemized)	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Transaction ID : SB17.5333
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 17	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. UPS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2013
Mailing Address PO Box 7247-0244		Amount of Each Disbursement this Period 53.76
City Philadelphia State PA Zip Code 19170-0001	Purpose of Disbursement Express Shipping	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Transaction ID : SB17.5333.0 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 17	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Sunshine Sports &amp; Marketing LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2013
Mailing Address 676 W Pullman Rd #186		Amount of Each Disbursement this Period 847.50
City Moscow State ID Zip Code 83843	Purpose of Disbursement Donor Mementos	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Transaction ID : SB17.5333.1 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 17	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3208.07
<b>TOTAL</b> 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 45 OF 72			
	<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) <b>A. Five Guys Burgers &amp; Fries</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2013
Mailing Address 1100 New Jersey SE Ave		Amount of Each Disbursement this Period 319.84
City Washington State DC Zip Code 20003	Purpose of Disbursement Food & Beverage	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Transaction ID : SB17.5333.2 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2013
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 20.00
City Dallas State TX Zip Code 75266-0108	Purpose of Disbursement Internet Service	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Transaction ID : SB17.5333.4 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Aaron's Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2013
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	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Transaction ID : SB17.5333.7 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 46 OF 72	
	<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) <b>A. Brazos Moving and Storage</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2013
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	Transaction ID : SB17.5333.8
Candidate Name <b>BILL FLORES FOR CONGRESS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: TX	District: 17	

Full Name (Last, First, Middle Initial) <b>B. INTUIT</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2013
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 Subscription	Transaction ID : SB17.5333.9
Candidate Name <b>BILL FLORES FOR CONGRESS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: TX	District: 17	

Full Name (Last, First, Middle Initial) <b>c. Upstream Communications</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2013
Mailing Address 1609 Shoal Creek Boulevard Suite 203		Amount of Each Disbursement this Period 1132.30
City Austin	State TX	
Zip Code 78701-1022	Purpose of Disbursement Website Hosting, Email Broadcast Services, Social Media Services, Donation _Capture Fees	Transaction ID : SB17.5333.11
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 47 OF 72	
	<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) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2013
Mailing Address PO Box 650448		Amount of Each Disbursement this Period 10927.17 <b>Transaction ID : SB17.5358</b>
City Dallas State TX Zip Code 75265-0448	Purpose of Disbursement Transportation, Fuel, Lodging, Airfare, Food & Bev, Storage, Email & Website (see below if itemized)	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. UPS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2013
Mailing Address PO Box 7247-0244		Amount of Each Disbursement this Period 35.52 <b>Transaction ID : SB17.5358.0</b>
City Philadelphia State PA Zip Code 19170-0001	Purpose of Disbursement Express Shipping	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Delta Air Lines, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2013
Mailing Address P.O. Box 20706		Amount of Each Disbursement this Period 687.90 <b>Transaction ID : SB17.5358.1</b>
City Atlanta State GA Zip Code 30320-6001	Purpose of Disbursement Airfare	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10927.17
<b>TOTAL</b> 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 48 OF 72	
	<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) <b>A. Aaron's Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2013
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	Transaction ID : SB17.5358.5 <b>[MEMO ITEM]</b>
Candidate Name <b>BILL FLORES FOR CONGRESS</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 17	

Full Name (Last, First, Middle Initial) <b>B. Brazos Moving and Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2013
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	Transaction ID : SB17.5358.6 <b>[MEMO ITEM]</b>
Candidate Name <b>BILL FLORES FOR CONGRESS</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 17	

Full Name (Last, First, Middle Initial) <b>C. INTUIT</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2013
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 Subscription	Transaction ID : SB17.5358.9 <b>[MEMO ITEM]</b>
Candidate Name <b>BILL FLORES FOR CONGRESS</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 17	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 49 OF 72			
	<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) <b>A. Upstream Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2013
Mailing Address 1609 Shoal Creek Boulevard Suite 203		Amount of Each Disbursement this Period 7587.96
City Austin State TX Zip Code 78701-1022	Purpose of Disbursement Website Hosting, Email Broadcast Services, Social Media Services, Donation Capture Fee	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Transaction ID : SB17.5358.10 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Waldorf Astoria</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2013
Mailing Address 301 Park Ave.		Amount of Each Disbursement this Period 904.19
City New York State NY Zip Code 10022	Purpose of Disbursement Lodging	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Transaction ID : SB17.5358.14 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. U&amp;I Top Transportation</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2013
Mailing Address 7 Sandyfields Ln.		Amount of Each Disbursement this Period 214.54
City Stony Point State NY Zip Code 10980	Purpose of Disbursement Transportation	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Transaction ID : SB17.5358.16 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 50 OF 72	
	<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) <b>A. Texas Tamale Company</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2013
Mailing Address 9087 Knight Rd.		Amount of Each Disbursement this Period 284.40
City Houston	State TX Zip Code 77054	
Purpose of Disbursement Food & Beverage		Transaction ID : SB17.5358.17
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: TX	District: 17	

Full Name (Last, First, Middle Initial) <b>B. A. Litteri Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2013
Mailing Address 517 Morse St. NE		Amount of Each Disbursement this Period 111.74
City Washington	State DC Zip Code 20002	
Purpose of Disbursement Food & Beverage		Transaction ID : SB17.5358.19
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: TX	District: 17	

Full Name (Last, First, Middle Initial) <b>c. American Express AMEX</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2013
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 : SB17.5393
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: TX	District: 17	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7.95
<b>TOTAL</b> 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 51 OF 72			
	<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) <b>A. American Express AMEX</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2013
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 4.00 <b>Transaction ID : SB17.5394</b>
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Fees	Category/ Type
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 17	

Full Name (Last, First, Middle Initial) <b>B. American Express AMEX</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2013
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 7.95 <b>Transaction ID : SB17.5395</b>
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Fees	Category/ Type
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 17	

Full Name (Last, First, Middle Initial) <b>c. American Express AMEX</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2013
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 1.60 <b>Transaction ID : SB17.5396</b>
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit Card Fees	Category/ Type
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 17	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	13.55
<b>TOTAL</b> 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 52 OF 72	
	<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) <b>A. American Express AMEX</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2013
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 7.95 <b>Transaction ID : SB17.5397</b>
City Phoenix	State AZ	
Zip Code 85072-3852		Category/ Type
Purpose of Disbursement Credit Card Fees		
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 17	

Full Name (Last, First, Middle Initial) <b>B. American Express AMEX</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2013
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 64.00 <b>Transaction ID : SB17.5398</b>
City Phoenix	State AZ	
Zip Code 85072-3852		Category/ Type
Purpose of Disbursement Credit Card Fees		
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 17	

Full Name (Last, First, Middle Initial) <b>c. E-Onlinedata</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2013
Mailing Address 280 Fore Street		Amount of Each Disbursement this Period 38.82 <b>Transaction ID : SB17.5402</b>
City Portland	State ME	
Zip Code 04101-4177		Category/ Type
Purpose of Disbursement Credit Card Fees		
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 17	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	110.77
<b>TOTAL</b> 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 53 OF 72			
	<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) <b>A. E-Onlinedata</b>		Date of Disbursement
Mailing Address 280 Fore Street		M M / D D / Y Y Y Y 05 / 02 / 2013
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit Card Fees		Amount of Each Disbursement this Period 48.25
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Transaction ID : SB17.5403
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: TX District: 17		

Full Name (Last, First, Middle Initial) <b>B. E-Onlinedata</b>		Date of Disbursement
Mailing Address 280 Fore Street		M M / D D / Y Y Y Y 05 / 07 / 2013
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit Card Fees		Amount of Each Disbursement this Period 36.65
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Transaction ID : SB17.5404
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: TX District: 17		

Full Name (Last, First, Middle Initial) <b>c. E-Onlinedata</b>		Date of Disbursement
Mailing Address 280 Fore Street		M M / D D / Y Y Y Y 05 / 10 / 2013
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit Card Fees		Amount of Each Disbursement this Period 39.20
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Transaction ID : SB17.5405
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: TX District: 17		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	124.10
<b>TOTAL</b> 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 54 OF 72			
	<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)		Date of Disbursement
<b>A. E-Onlinedata</b>		M M / D D / Y Y Y Y 05 / 21 / 2013
Mailing Address 280 Fore Street		Amount of Each Disbursement this Period
City Portland State ME Zip Code 04101-4177	Purpose of Disbursement Credit Card Fees	0.56
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Transaction ID : SB17.5406
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 17		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. E-Onlinedata</b>		M M / D D / Y Y Y Y 06 / 04 / 2013
Mailing Address 280 Fore Street		Amount of Each Disbursement this Period
City Portland State ME Zip Code 04101-4177	Purpose of Disbursement Credit Card Fees	27.87
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Transaction ID : SB17.5407
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 17		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. E-Onlinedata</b>		M M / D D / Y Y Y Y 06 / 07 / 2013
Mailing Address 280 Fore Street		Amount of Each Disbursement this Period
City Portland State ME Zip Code 04101-4177	Purpose of Disbursement Credit Card Fees	22.93
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Transaction ID : SB17.5408
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 17		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	51.36
<b>TOTAL</b> 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 55 OF 72			
	<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) <b>A. E-Onlinedata</b>		Date of Disbursement
Mailing Address 280 Fore Street		M M / D D / Y Y Y Y 06 / 10 / 2013
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit Card Fees		Amount of Each Disbursement this Period 57.72
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Transaction ID : SB17.5409
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: TX District: 17		

Full Name (Last, First, Middle Initial) <b>B. E-Onlinedata</b>		Date of Disbursement
Mailing Address 280 Fore Street		M M / D D / Y Y Y Y 06 / 14 / 2013
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit Card Fees		Amount of Each Disbursement this Period 3.65
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Transaction ID : SB17.5410
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: TX District: 17		

Full Name (Last, First, Middle Initial) <b>c. E-Onlinedata</b>		Date of Disbursement
Mailing Address 280 Fore Street		M M / D D / Y Y Y Y 06 / 28 / 2013
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit Card Fees		Amount of Each Disbursement this Period 47.01
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Transaction ID : SB17.5703
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: TX District: 17		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	108.38
<b>TOTAL</b> 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 56 OF 72	
	<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) <b>A. Gober Hilgers PLLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2013
Mailing Address 2101 Cedar Springs Road Suite 1050		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB17.5294</b>
City Dallas State TX Zip Code 75201-2104	Purpose of Disbursement Legal and Accounting Fees	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Gober Hilgers PLLC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2013
Mailing Address 2101 Cedar Springs Road Suite 1050		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB17.5250</b>
City Dallas State TX Zip Code 75201-2104	Purpose of Disbursement Legal and Accounting Fees	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. J2 Global Phone People</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2013
Mailing Address 6922 Hollywood Boulevard		Amount of Each Disbursement this Period 50.93 <b>Transaction ID : SB17.5300</b>
City Hollywood State CA Zip Code 90028-6117	Purpose of Disbursement Telephone Service	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4050.93
<b>TOTAL</b> 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 57 OF 72			
	<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) <b>A. J2 Global Phone People</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2013
Mailing Address 6922 Hollywood Boulevard		Amount of Each Disbursement this Period 50.93 <b>Transaction ID : SB17.5302</b>
City Hollywood State CA Zip Code 90028-6117	Purpose of Disbursement Telephone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. J2 Global Phone People</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2013
Mailing Address 6922 Hollywood Boulevard		Amount of Each Disbursement this Period 50.93 <b>Transaction ID : SB17.5304</b>
City Hollywood State CA Zip Code 90028-6117	Purpose of Disbursement Telephone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Lilly &amp; Company</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2013
Mailing Address 1005 Congress Avenue Suite 910		Amount of Each Disbursement this Period 5581.69 <b>Transaction ID : SB17.5292</b>
City Austin State TX Zip Code 78701-2467	Purpose of Disbursement Consulting - Fundraising	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 17		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5683.55
<b>TOTAL</b> 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 58 OF 72	
	<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) <b>A. Lilly &amp; Company</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2013
Mailing Address 1005 Congress Avenue Suite 910		Amount of Each Disbursement this Period 5892.76 <b>Transaction ID : SB17.5256</b>
City Austin State TX Zip Code 78701-2467	Purpose of Disbursement Consulting - Fundraising	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Lilly &amp; Company</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2013
Mailing Address 1005 Congress Avenue Suite 910		Amount of Each Disbursement this Period 7056.41 <b>Transaction ID : SB17.5254</b>
City Austin State TX Zip Code 78701-2467	Purpose of Disbursement Consulting - Fundraising	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Marathon Strategic Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2013
Mailing Address 3771 Vinecrest Dr.		Amount of Each Disbursement this Period 4000.00 <b>Transaction ID : SB17.5293</b>
City Dallas State TX Zip Code 75229	Purpose of Disbursement Consultant-Communications	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	16949.17
<b>TOTAL</b> 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 59 OF 72	
	<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) <b>A. Marathon Strategic Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2013
Mailing Address 3771 Vinecrest Dr.		Amount of Each Disbursement this Period 4000.00 <b>Transaction ID : SB17.5295</b>
City Dallas State TX Zip Code 75229	Purpose of Disbursement Consultant-Communications	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Marathon Strategic Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2013
Mailing Address 3771 Vinecrest Dr.		Amount of Each Disbursement this Period 4000.00 <b>Transaction ID : SB17.5251</b>
City Dallas State TX Zip Code 75229	Purpose of Disbursement Consultant-Communications	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Republican Women of the Brazos Valley</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2013
Mailing Address 1640 Briarcrest #122		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB17.5287</b>
City Bryan State TX Zip Code 77802	Purpose of Disbursement Contribution	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8250.00
<b>TOTAL</b> 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 60 OF 72			
	<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) <b>A. Triangle Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2013
Mailing Address 3810 Old College Rd.		Amount of Each Disbursement this Period 291.73 <b>Transaction ID : SB17.5255</b>
City Bryan	State TX	
Purpose of Disbursement Storage		Category/ Type
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 17	

Full Name (Last, First, Middle Initial) <b>B. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2013
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 90.00 <b>Transaction ID : SB17.5291</b>
City Dallas	State TX	
Purpose of Disbursement Telephone Service		Category/ Type
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 17	

Full Name (Last, First, Middle Initial) <b>C. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2013
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 84.26 <b>Transaction ID : SB17.5286</b>
City Dallas	State TX	
Purpose of Disbursement Telephone Service		Category/ Type
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 17	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	465.99
<b>TOTAL</b> 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 61 OF 72			
	<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) <b>A. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2013
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 144.87 <b>Transaction ID : SB17.5253</b>
City Dallas State TX Zip Code 75266-0108	Purpose of Disbursement Telephone Service	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 17		

Full Name (Last, First, Middle Initial) <b>B. VONAGE</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2013
Mailing Address 23 Main Street		Amount of Each Disbursement this Period 177.81 <b>Transaction ID : SB17.5301</b>
City Holmdel State NJ Zip Code 07733-2136	Purpose of Disbursement Telephone Service	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 17		

Full Name (Last, First, Middle Initial) <b>C. VONAGE</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2013
Mailing Address 23 Main Street		Amount of Each Disbursement this Period 177.81 <b>Transaction ID : SB17.5303</b>
City Holmdel State NJ Zip Code 07733-2136	Purpose of Disbursement Telephone Service	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 17		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	500.49
<b>TOTAL</b> 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 62 OF 72	
	<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) <b>A. VONAGE</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2013
Mailing Address 23 Main Street		Amount of Each Disbursement this Period 177.81
City Holmdel State NJ Zip Code 07733-2136	Purpose of Disbursement Telephone Service	
Candidate Name <b>BILL FLORES FOR CONGRESS</b>		Transaction ID : SB17.5305
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 17	Category/Type	

Full Name (Last, First, Middle Initial) <b>B.</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	
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) <b>C.</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	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	177.81
<b>TOTAL</b> This Period (last page this line number only).....	56532.79

**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 63 OF 72	
	<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) <b>A. COFFMAN FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2013
Mailing Address 4950 S YOSEMITE STREET F2 #511		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB21.5280</b>
City GREENWOOD VILLAGE State CO Zip Code 80111	Purpose of Disbursement Contribution	
Candidate Name <b>MICHAEL COFFMAN</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CO District: 06		

Full Name (Last, First, Middle Initial) <b>B. DENHAM FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2013
Mailing Address 2150 RIVER PLAZA DR., #150		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB21.5285</b>
City SACRAMENTO State CA Zip Code 95833	Purpose of Disbursement Contribution	
Candidate Name <b>JEFF DENHAM</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 10		

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DAVE JOYCE</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2013
Mailing Address 320 KENARDEN DRIVE		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB21.5257</b>
City CLEVELAND State OH Zip Code 44143	Purpose of Disbursement Contribution	
Candidate Name <b>DAVID P JOYCE</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OH District: 14		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4500.00
<b>TOTAL</b> 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 64 OF 72			
	<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) <b>A. FRIENDS OF JOE HECK</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2013
Mailing Address PO BOX 750114		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB21.5273</b>
City LAS VEGAS	State NV	
Zip Code 89136	Purpose of Disbursement Contribution	Category/Type
Candidate Name <b>JOE HECK</b>		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NV	District: 03	

Full Name (Last, First, Middle Initial) <b>B. GIBBS FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2013
Mailing Address 13871 TR 473		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB21.5278</b>
City LAKEVILLE	State OH	
Zip Code 44638	Purpose of Disbursement Contribution	Category/Type
Candidate Name <b>ROBERT GIBBS</b>		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: OH	District: 07	

Full Name (Last, First, Middle Initial) <b>C. SOUTHERLAND FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2013
Mailing Address PO BOX 1692		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB21.5281</b>
City LYNN HAVEN	State FL	
Zip Code 32444	Purpose of Disbursement Contribution	Category/Type
Candidate Name <b>WILLIAM STEVE II SOUTHERLAND</b>		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: FL	District: 02	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4500.00
<b>TOTAL</b> 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 65 OF 72	
	<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) <b>A. WALORSKI FOR CONGRESS INC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2013
Mailing Address PO BOX 954		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB21.5275</b>
City MISHAWAKA State IN Zip Code 46546	Purpose of Disbursement Contribution	
Candidate Name <b>JACKIE WALORSKI (SWIHART)</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 02		

Full Name (Last, First, Middle Initial) <b>B.</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	
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) <b>C.</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	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	10500.00

**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 57050.00 192950.00

**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)..... ▶ 192950.00  
**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/10.4514

**BILL FLORES FOR CONGRESS**

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

**[PERSONAL FUNDS]**

Election: 2010

**BILL FLORES**

Primary

General

Other (specify) ▼

Runoff

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 38500.00 11500.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

03

09

2010

None

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)..... 11500.00  
**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/10.4516

**BILL FLORES FOR CONGRESS**

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

**[PERSONAL FUNDS]**

Election: 2010

**BILL FLORES**

Primary

General

Other (specify) ▼

Runoff

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  
75000.00 0.00 75000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M 04 M

D 12 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)..... ▶ 75000.00  
**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**

NAME OF COMMITTEE (In Full) **BILL FLORES FOR CONGRESS** Transaction ID : **SC/10.4517**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>BILL FLORES</b>	<b>[PERSONAL FUNDS]</b>	Election: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> 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
80000.00	66450.00	13550.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 30 / Y 2010	M M / D D / Y None	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	13550.00
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **BILL FLORES FOR CONGRESS** Transaction ID : **SC/10.4519**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>BILL FLORES</b>	<b>[PERSONAL FUNDS]</b>	Election: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> 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	0.00	195000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 11 / D 01 / Y 2010	M M / D D / Y None	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	195000.00
<b>TOTALS</b> 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 `F9DCFHZG7 <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**

NAME OF COMMITTEE (In Full) **BILL FLORES FOR CONGRESS** Transaction ID : **SC/10.4335**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **BILL FLORES** *[PERSONAL FUNDS]* Election: 2012  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
 PO BOX 6207

City State ZIP Code  
 BRYAN TX 77805

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

**TERMS**

Date Incurred M 12 / D 31 / Y 2010	Date Due M / D / Y None	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

<b>SUBTOTALS</b> This Period This Page (optional).....	50000.00
<b>TOTALS</b> This Period (last page in this line only).....	538000.00

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