

# 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  
**FRIENDS OF BUD CRAMER**

ADDRESS (number and street) P.O. Box 2621  
 Check if different than previously reported. (ACC) Huntsville AL 35804

2. **FEC IDENTIFICATION NUMBER** C C00239038 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
CITY STATE ZIP CODE STATE DISTRICT  
AL 05

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M / D D / Y Y Y Y in the State of    
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y  
01 / 01 / 2014 through 03 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Henri B. McDaniel

Signature of Treasurer Henri B. McDaniel *[Electronically Filed]* Date M M / D D / Y Y Y Y  
04 / 14 / 2014

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name  
**FRIENDS OF BUD CRAMER**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	0.00	0.00
(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)) .....	0.00	0.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	464.00	11697.65
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	464.00	11697.65
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	<b>994113.33</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>0.00</b>	

**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

**FRIENDS OF BUD CRAMER**

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).....	0.00	0.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	0.00
<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	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	183.69	31809.95
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	183.69	31809.95

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	464.00	11697.65
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 .....	8250.00	144500.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	8714.00	156197.65

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1002643.64
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	183.69
25. SUBTOTAL (add Line 23 and Line 24).....	1002827.33
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	8714.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	994113.33

**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 9
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" 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)  
**FRIENDS OF BUD CRAMER**

Full Name (Last, First, Middle Initial) <b>Wells Fargo</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2014	
Mailing Address 525 Madison Street		<b>Transaction ID : SA15.5421</b>	
City Huntsville	State AL	Zip Code 35801	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 183.69 interest income	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 11858.86		

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	183.69
<b>TOTAL</b> This Period (last page this line number only).....	183.69

**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 6 OF 9	
	<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)  
**FRIENDS OF BUD CRAMER**

Full Name (Last, First, Middle Initial) <b>A. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address P.O. Box 660351		Amount of Each Disbursement this Period 464.00 <b>Transaction ID : SB17.5423</b>
City Dallas	State TX	
Zip Code 75266-0351	Purpose of Disbursement Federal tax payment	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>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	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>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	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	464.00
<b>TOTAL</b> This Period (last page this line number only).....	464.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 9	
	<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)  
**FRIENDS OF BUD CRAMER**

**A. FRIENDS OF PATRICK MURPHY**

Full Name (Last, First, Middle Initial)  
Mailing Address 4521 PGA BLVD. #412

City PALM BEACH GARDENS State FL Zip Code 33418

Purpose of Disbursement political contribution

Candidate Name

Office Sought:  House  Senate  President  
State: FL District: 18

Disbursement For:  Primary  General  Other (specify)

Date of Disbursement: 03 / 19 / 2014

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB21.5440

Category/Type: 011

**B. FRIENDS OF ROSA DELAURO**

Full Name (Last, First, Middle Initial)  
Mailing Address 12 TRUMBULL STREET

City NEW HAVEN State CT Zip Code 06511

Purpose of Disbursement political contribution

Candidate Name

Office Sought:  House  Senate  President  
State: CT District: 03

Disbursement For:  Primary  General  Other (specify)

Date of Disbursement: 03 / 26 / 2014

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB21.5427

Category/Type: 011

**C. GRAHAM FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 310

City TALLAHASSEE State FL Zip Code 32302

Purpose of Disbursement contribution to candidate commtee

Candidate Name

Office Sought:  House  Senate  President  
State: FL District: 02

Disbursement For:  Primary  General  Other (specify)

Date of Disbursement: 03 / 26 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB21.5424

Category/Type: 011

**SUBTOTAL** of Disbursements This Page (optional)..... 2500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 9
	<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)  
**FRIENDS OF BUD CRAMER**

Full Name (Last, First, Middle Initial) <b>A. HOPE FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2014
Mailing Address PO BOX 3060		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21.5434</b>
City ARLINGTON	State VA	
Zip Code 22203	Purpose of Disbursement political contribution	Category/ Type 011
Candidate Name	Office Sought: <input checked="" 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: VA District: 08	

Full Name (Last, First, Middle Initial) <b>B. MOBROOKSFORCONGRESS.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 7610 FOXFIRE DR.		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21.5426</b>
City HUNTSVILLE	State AL	
Zip Code 35802	Purpose of Disbursement contribution to candidate committee	Category/ Type 011
Candidate Name	Office Sought: <input checked="" 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: AL District: 05	

Full Name (Last, First, Middle Initial) <b>C. POMPEO FOR CONGRESS INC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address PO BOX 780146		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21.5430</b>
City WICHITA	State KS	
Zip Code 67212	Purpose of Disbursement political contribution	Category/ Type 011
Candidate Name	Office Sought: <input checked="" 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: KS District: 04	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3000.00
<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 9 OF 9
	<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)  
**FRIENDS OF BUD CRAMER**

Full Name (Last, First, Middle Initial) <b>A. SCOTT PETERS FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address PO BOX 70980		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21.5436</b>
City WASHINGTON	State DC	
Zip Code 20024	Purpose of Disbursement political contribution	Category/ Type 011
Candidate Name	Office Sought: <input checked="" 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: CA District: 52	

Full Name (Last, First, Middle Initial) <b>B. SHANNON FOR SENATE</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address PO BOX 18182		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : SB21.5438</b>
City OKLAHOMA CITY	State OK	
Zip Code 73154	Purpose of Disbursement political contribution	Category/ Type 011
Candidate Name	Office Sought: <input checked="" 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: OK District: 00	

Full Name (Last, First, Middle Initial) <b>C. SWALWELL FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address P.O. BOX 2847		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21.5442</b>
City DUBLIN	State CA	
Zip Code 94568	Purpose of Disbursement political contribution	Category/ Type 011
Candidate Name	Office Sought: <input checked="" 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: CA District: 15	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2750.00
<b>TOTAL</b> This Period (last page this line number only).....	8250.00