

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

GOOD FUND, THE

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|--|--|
| 6. (a) Cash on Hand January 1, <input type="text" value="2014"/> | <input type="text" value="135661.58"/> | <input type="text" value="135661.58"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="152276.71"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="39023.28"/> | <input type="text" value="320602.99"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="191299.99"/> | <input type="text" value="456264.57"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="61694.09"/> | <input type="text" value="326658.67"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="129605.90"/> | <input type="text" value="129605.90"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | <input type="text" value="0.00"/> | |

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name
GOOD FUND, THE

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

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|---------------------------------------|---|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 25000.00 | 63150.00 |
| (ii) Unitemized | 0.00 | 0.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 25000.00 | 63150.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 12023.28 | 250998.96 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 37023.28 | 314148.96 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 4454.03 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 2000.00 | 2000.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶ | 39023.28 | 320602.99 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 39023.28 | 320602.99 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 1244.09 | 115458.67 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 1244.09 | 115458.67 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 57250.00 | 156750.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements | 3200.00 | 54450.00 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 61694.09 | 326658.67 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 61694.09 | 326658.67 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 37023.28 | 314148.96 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 37023.28 | 314148.96 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 1244.09 | 115458.67 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 1244.09 | 115458.67 |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 OF 20 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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

NAME OF COMMITTEE (In Full)
GOOD FUND, THE

| | | |
|---|----------------------------|--|
| Full Name (Last, First, Middle Initial) A. Peter Chernin | | Date of Receipt M M / D D / Y Y Y Y 11 / 10 / 2014 Transaction ID : 2208 |
| Mailing Address 9100 Wilshire Blvd #400W | | Amount of Each Receipt this Period 5000.00 |
| City Beverly Hills | State Zip Code CA 90212 | |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date ▼ 5000.00 |
| Name of Employer Chernin Entertainment | Occupation President | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|----------------------------|--|
| Full Name (Last, First, Middle Initial) B. Robert M Kavner | | Date of Receipt M M / D D / Y Y Y Y 11 / 10 / 2014 Transaction ID : 2210 |
| Mailing Address P O Box 1355 | | Amount of Each Receipt this Period 5000.00 |
| City Carmel By The Sea | State Zip Code CA 93921 | |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date ▼ 5000.00 |
| Name of Employer Pandora | Occupation Board Member | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|----------------------------|--|
| Full Name (Last, First, Middle Initial) C. James G Leprino | | Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2014 Transaction ID : 2176 |
| Mailing Address 1830 W 38th Ave | | Amount of Each Receipt this Period 5000.00 |
| City Denver | State Zip Code CO 80211 | |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date ▼ 5000.00 |
| Name of Employer Leprino Foods | Occupation Chairman | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 15000.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER: PAGE 7 OF 20
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
GOOD FUND, THE

Full Name (Last, First, Middle Initial)
A. Brian McAndrews

Mailing Address 5635 NE Ambleside Rd

City State Zip Code
Seattle WA 98105

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

Name of Employer Occupation
Pandora CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 10 / 2014
Transaction ID : 2209

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. Daniel A Vecchiarelli

Mailing Address 1830 W 38th Ave

City State Zip Code
Denver CO 80211

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

Name of Employer Occupation
Leprino Foods Vice Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 10 / 2014
Transaction ID : 2211

Amount of Each Receipt this Period
5000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 10000.00 |
| TOTAL This Period (last page this line number only).....▶ | 25000.00 |

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

| | | | |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 8 OF 20 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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)
GOOD FUND, THE

Full Name (Last, First, Middle Initial)
A. AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 325 Seventh Street NW
Suite 700

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 20 / 2014
Transaction ID : 2214

Amount of Each Receipt this Period
3000.00

Full Name (Last, First, Middle Initial)
B. GOODLATTE VICTORY COMMITTEE

Mailing Address 228 S WASHINGTON STREET SUITE 115

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00551648

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
14773.88

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 20 / 2014
Transaction ID : 2212

Amount of Each Receipt this Period
4123.28

Transfer of net proceeds

Full Name (Last, First, Middle Initial)
C. TIME WARNER INC. PAC

Mailing Address 800 CONNECTICUT AVE., NW
SUITE 1200

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00339291

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 20 / 2014
Transaction ID : 2213

Amount of Each Receipt this Period
5000.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ▶ 7123.28

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

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

| | | | |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 9 OF 20 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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)
GOOD FUND, THE

A. Pandora Media Inc. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2101 Webster St
 16th Floor
 City State Zip Code
 Oakland CA 94612
 FEC ID number of contributing federal political committee. **C** C00569285
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2400.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 10 / 2014
Transaction ID : 2206
 Amount of Each Receipt this Period
 2400.00

B. VIACOM INTERNATIONAL, INC. POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1501 M STREET
 SUITE 1100
 City State Zip Code
 WASHINGTON DC 20005
 FEC ID number of contributing federal political committee. **C** C00167759
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 10 / 2014
Transaction ID : 2207
 Amount of Each Receipt this Period
 2500.00

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) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y
 Amount of Each Receipt this Period

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 4900.00 |
| TOTAL This Period (last page this line number only).....▶ | 12023.28 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 20
(check only one)

| | | | | | | | | |
|------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|--|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|--|

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

NAME OF COMMITTEE (In Full)
GOOD FUND, THE

A. Sycuan Band of the Kumeyaay Nation

Full Name (Last, First, Middle Initial)
Mailing Address 2 Kwaaypaay Court

City El Cajon State CA Zip Code 92019

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : 2175

Amount of Each Receipt this Period
2000.00

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / 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) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2000.00 |
| TOTAL This Period (last page this line number only).....▶ | 2000.00 |

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

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

FOR LINE NUMBER:
(check only one)

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

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)
GOOD FUND, THE

Full Name (Last, First, Middle Initial)

A. Robert W. Goodlatte

Mailing Address 5341 Fox Ridge Road

City State Zip Code
Roanoke VA 24018

Purpose of Disbursement
Travel expense reimbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 11 | | | 12 | | | 2014 | | | |

Transaction ID : 2205

Amount of Each Disbursement this Period

| |
|--------|
| 459.72 |
|--------|

Full Name (Last, First, Middle Initial)

B. Laura Bell Consulting

Mailing Address 4618 Latrobe Place

City State Zip Code
Alexandria VA 22311

Purpose of Disbursement
Travel expense reimbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 10 | | | 27 | | | 2014 | | | |

Transaction ID : 2201

Amount of Each Disbursement this Period

| |
|--------|
| 284.37 |
|--------|

Full Name (Last, First, Middle Initial)

C. Political Compliance Services

Mailing Address PO Box 373

City State Zip Code
Fairfax Station VA 22039

Purpose of Disbursement
Consultant: Compliance

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 11 | | | 01 | | | 2014 | | | |

Transaction ID : 2202

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

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

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

| |
|---------|
| 1244.09 |
|---------|

| |
|---------|
| 1244.09 |
|---------|

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

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

FOR LINE NUMBER:
(check only one)

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

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)
GOOD FUND, THE

Full Name (Last, First, Middle Initial)

A. ANDY TOBIN FOR CONGRESS

Mailing Address 2532 NORTH 4TH STREET #528

City State Zip Code
FLAGSTAFF AZ 86004

Purpose of Disbursement

Candidate Name

ANDY HON. TOBIN

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: AZ District: 01

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 23 / 2014

Transaction ID : 2178

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. BILL CASSIDY FOR US SENATE

Mailing Address PO BOX 80505

City State Zip Code
BATON ROUGE LA 70898

Purpose of Disbursement

Candidate Name

WILLIAM CASSIDY

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
GENERAL RUNOFF

State: LA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2014

Transaction ID : 2199

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. BLUM FOR CONGRESS

Mailing Address 2728 ASBURY ROAD SUITE 400

City State Zip Code
DUBUQUE IA 52001

Purpose of Disbursement

Candidate Name

RODNEY LELAND BLUM

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IA District: 01

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 23 / 2014

Transaction ID : 2180

Amount of Each Disbursement this Period

3000.00

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

8000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)
GOOD FUND, THE

Full Name (Last, First, Middle Initial)

A. CARLOS CURBELO CONGRESS

Mailing Address 8770 SUNSET DRIVE #355

City MIAMI State FL Zip Code 33173

Purpose of Disbursement

Candidate Name

CARLOS CURBELO

Office Sought: House
 Senate
 President

State: FL District: 26

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 23 | | 2014 |

Transaction ID : 2179

Amount of Each Disbursement this Period

| |
|---------|
| 3000.00 |
|---------|

Full Name (Last, First, Middle Initial)

B. FRENCH HILL FOR ARKANSAS

Mailing Address PO BOX 7841

City LITTLE ROCK State AR Zip Code 72217

Purpose of Disbursement

Candidate Name

JAMES FRENCH HILL

Office Sought: House
 Senate
 President

State: AR District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 23 | | 2014 |

Transaction ID : 2177

Amount of Each Disbursement this Period

| |
|---------|
| 3000.00 |
|---------|

Full Name (Last, First, Middle Initial)

C. FRIENDS OF FRANK GUINTA

Mailing Address P.O. BOX 877

City MANCHESTER State NH Zip Code 03105

Purpose of Disbursement

Candidate Name

FRANK GUINTA

Office Sought: House
 Senate
 President

State: NH District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 23 | | 2014 |

Transaction ID : 2185

Amount of Each Disbursement this Period

| |
|---------|
| 3000.00 |
|---------|

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

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

| |
|---------|
| 9000.00 |
|---------|

| |
|--|
| |
|--|

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

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

FOR LINE NUMBER:
(check only one)

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

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)
GOOD FUND, THE

Full Name (Last, First, Middle Initial)
A. GARRET GRAVES FOR CONGRESS

Mailing Address **PO BOX 64845**

City **BATON ROUGE** State **LA** Zip Code **70896**

Purpose of Disbursement

Candidate Name
GARRET GRAVES

Office Sought: House Senate President
State: **LA** District: **06**

Disbursement For: 2014
 Primary General
 Other (specify) **GENERAL RUNOFF**

Date of Disbursement: **11 / 07 / 2014**

Transaction ID : **2200**

Amount of Each Disbursement this Period: **2000.00**

Full Name (Last, First, Middle Initial)
B. HURD FOR CONGRESS

Mailing Address **PO BOX 656**

City **HELOTES** State **TX** Zip Code **78023**

Purpose of Disbursement

Candidate Name
WILLIAM HURD

Office Sought: House Senate President
State: **TX** District: **23**

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement: **10 / 23 / 2014**

Transaction ID : **2190**

Amount of Each Disbursement this Period: **3000.00**

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

Mailing Address **PO BOX 727**

City **HUNTINGTON** State **WV** Zip Code **25711**

Purpose of Disbursement

Candidate Name
EVAN H JENKINS

Office Sought: House Senate President
State: **WV** District: **03**

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement: **10 / 23 / 2014**

Transaction ID : **2189**

Amount of Each Disbursement this Period: **3000.00**

SUBTOTAL of Disbursements This Page (optional)..... ▶ **8000.00**

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)
GOOD FUND, THE

Full Name (Last, First, Middle Initial)

A. KATKO FOR CONGRESS

Mailing Address 5407 ANVIL DRIVE

City CAMILLUS State NY Zip Code 13031

Purpose of Disbursement

Candidate Name
JOHN M KATKO

Office Sought: House
 Senate
 President
State: NY District: 24

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 10 | | | 23 | | | 2014 | | | |

Transaction ID : 2187

Amount of Each Disbursement this Period

| |
|---------|
| 3000.00 |
|---------|

Full Name (Last, First, Middle Initial)

B. MCSALLY FOR CONGRESS

Mailing Address PO BOX 19128

City TUCSON State AZ Zip Code 85731

Purpose of Disbursement

Candidate Name
MARTHA E MS. MCSALLY

Office Sought: House
 Senate
 President
State: AZ District: 08

Disbursement For: 2014
 Primary General
 Other (specify) ▼
RECOUNT FUND - GENER

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 11 | | | 14 | | | 2014 | | | |

Transaction ID : 2216

Amount of Each Disbursement this Period

| |
|---------|
| 2000.00 |
|---------|

Full Name (Last, First, Middle Initial)

C. MIKE BOST FOR CONGRESS COMMITTEE

Mailing Address PO BOX 1212

City MURPHYSBORO State IL Zip Code 62966

Purpose of Disbursement

Candidate Name
MICHAEL J BOST

Office Sought: House
 Senate
 President
State: IL District: 12

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 10 | | | 23 | | | 2014 | | | |

Transaction ID : 2198

Amount of Each Disbursement this Period

| |
|---------|
| 2000.00 |
|---------|

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

| |
|---------|
| 7000.00 |
|---------|

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

| |
|--|
| |
|--|

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

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

FOR LINE NUMBER:
(check only one)

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

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)
GOOD FUND, THE

Full Name (Last, First, Middle Initial)

A. MILLER-MEEKS FOR CONGRESS

Mailing Address P.O. BOX 1103

City OTTUMWA State IA Zip Code 52501

Purpose of Disbursement

Candidate Name

MARIANNETTE MILLER-MEEKS

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IA District: 02

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 10 | | | 23 | | | 2014 | | | |

Transaction ID : 2181

Amount of Each Disbursement this Period

| |
|---------|
| 3000.00 |
|---------|

Full Name (Last, First, Middle Initial)

B. MOONEY FOR CONGRESS

Mailing Address P.O. BOX 1863

City MARTINSBURG State WV Zip Code 25402

Purpose of Disbursement

Candidate Name

ALEXANDER XAVIER MOONEY

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WV District: 02

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 10 | | | 23 | | | 2014 | | | |

Transaction ID : 2188

Amount of Each Disbursement this Period

| |
|---------|
| 3000.00 |
|---------|

Full Name (Last, First, Middle Initial)

C. MORGAN GRIFFITH FOR CONGRESS

Mailing Address PO BOX 361

City CHRISTIANSBURG State VA Zip Code 24068

Purpose of Disbursement

Candidate Name

H MORGAN GRIFFITH

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: VA District: 09

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 10 | | | 23 | | | 2014 | | | |

Transaction ID : 2191

Amount of Each Disbursement this Period

| |
|---------|
| 4750.00 |
|---------|

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

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

| |
|----------|
| 10750.00 |
|----------|

| |
|--|
| |
|--|

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

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

FOR LINE NUMBER:
(check only one)

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

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)
GOOD FUND, THE

Full Name (Last, First, Middle Initial)

A. POLIQUIN FOR CONGRESS

Mailing Address PO BOX 50

City OAKLAND State ME Zip Code 04963

Purpose of Disbursement

Candidate Name
BRUCE L POLIQUIN

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

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 29 / 2014

Transaction ID : 2203

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. RALPH ABRAHAM FOR CONGRESS

Mailing Address PO 270

City ARCHIBALD State LA Zip Code 71218

Purpose of Disbursement

Candidate Name
RALPH LEE ABRAHAM

Office Sought: House
 Senate
 President
State: LA District: 05

Disbursement For: 2014
 Primary General
 Other (specify) ▼
GENERAL RUNOFF

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2014

Transaction ID : 2204

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. SCOTT GARRETT FOR CONGRESS

Mailing Address P.O. Box 905

City Newton State NJ Zip Code 07860

Purpose of Disbursement

Candidate Name
SCOTT REP. GARRETT

Office Sought: House
 Senate
 President
State: NJ District: 05

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 23 / 2014

Transaction ID : 2193

Amount of Each Disbursement this Period

2500.00

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

6500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)
GOOD FUND, THE

Full Name (Last, First, Middle Initial)

A. VALADAO FOR CONGRESS

Mailing Address 504 VAN NESS

City FRESNO State CA Zip Code 93721

Purpose of Disbursement
Void previously issued check

Candidate Name
DAVID VALADAO

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: CA District: 21 2014

Date of Disbursement

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

Transaction ID : 2197

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| - | 1 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. WESTROM FOR CONGRESS

Mailing Address PO BOX 210

City ELBOW LAKE State MN Zip Code 56531

Purpose of Disbursement

Candidate Name
TORREY WESTROM

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: MN District: 07 2014

Date of Disbursement

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

Transaction ID : 2184

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 3 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. YOUNG FOR IOWA, INC.

Mailing Address PO BOX 162

City VAN METER State IA Zip Code 50261

Purpose of Disbursement

Candidate Name
DAVID YOUNG

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: IA District: 03 2014

Date of Disbursement

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

Transaction ID : 2182

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 3 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|

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

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

| | | | | | |
|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

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

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

FOR LINE NUMBER:
(check only one)

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

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)
GOOD FUND, THE

Full Name (Last, First, Middle Initial)

A. ZELDIN FOR CONGRESS

Mailing Address 47 FLINTLOCK DRIVE

City SHIRLEY State NY Zip Code 11967

Purpose of Disbursement

Candidate Name
LEE MICHAEL ZELDIN

Office Sought: House
 Senate
 President
State: NY District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /
10 / 23 / 2014

Transaction ID : 2186

Amount of Each Disbursement this Period

3000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

3000.00

57250.00

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

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

FOR LINE NUMBER:
(check only one)

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

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)
GOOD FUND, THE

Full Name (Last, First, Middle Initial)

A. Republican Party of Virginia

Mailing Address 115 E. Grace Street

City Richmond State VA Zip Code 23219

Purpose of Disbursement

Candidate Name
Republican Party of Virginia

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 23 / 2014

Transaction ID : 2194

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Steve Landes for Delegate

Mailing Address P. O. Box 7067

City Richmond State VA Zip Code 23221

Purpose of Disbursement

Candidate Name
Steve Landes for Delegate

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 23 / 2014

Transaction ID : 2195

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

3000.00

3000.00