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Only

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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED SECRETARY OF THE SENATE PUBLIC RECUPOS

14 JUL -8 PM 2:21

FEC FORM 3 (Revised 02/2003)

			Offi	ce Use Only
NAME OF TYPE COMMITTEE (in full)	OR PRINT ¥	Example: if typing, type over the lines.	12FE4M5	
COMMITTEE TO ADDRESS (number and street) Check if different		ICHAEL, BI,		
than providently	CITY 3. IS THI	S NEW	STATE AMENDED	ZIP CODE A STATE ▼ DISTRICT
4. TYPE OF REPORT (Choose On (a) Quarterly Reports: April 15 Quarterly Report (Quarterly Report (Qua	(b) 12-Day	PRE-Election Report for the Primary (12P) Convention (12C)	(A)	Runoff (12R)
January 31 Year-End Report Termination Report (TER)	Liection	POST-Election Report for the General (30G)	Runoff (30R)	in the State of Special (30S) in the State of S
5. Covering Period 0 9 '		through <u></u> でん	6 ' 3 0 ' 2 C	274
Signature of Treasurer Muchas	chde Bic el Bickelm	kelmeyer ger	Date 07	2014
NOTE: Submission of false, erroneous, or in	complete information m	nay subject the person signing	this Report to the pena	ities of 2 U.S.C. §437g.
Use				0 50011

FEC Form 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

Page 2

Write or Type Committee Name

Report Covering the Period:

COMMITTEE TO ELECT MICHAEL BICKELMEYER

From: COLUMN A COLUMN B This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (other than loans) (from Line 11(e)) .. 1,0,20,00 (b) Total Contribution Refunds (from Line 20(d)) .. (c) Net Contributions (other than loans) 2,2,0,00 (subtract Line 6(b) from Line 6(a))... 02000 Net Operating Expenditures Total Operating Expenditures (from Line 17) .. (b) Total Offsets to Operating Expenditures (from Line 14)... (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))... Cash on Hand at Close of Reporting Period (from Line 27)... Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ... 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ...

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

FEC Form 3 (Revised 12/2003)

of Receipts

Page 3

Write or Type Committee Name

COMMITTEE TO ELECT MICHAEL BICKELMEYER

Report Covering the Period: From: I. RECEIPTS COLUMN A COLUMN B **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)... (ii) Unitemized (iii) TOTAL of contributions from individuals . (b) Political Party Committees... (c) Other Political Committees (such as PACs) .. (d) The Candidate..... TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))... 12. TRANSFERS FROM OTHER **AUTHORIZED COMMITTEES...** 13. LOANS: (a) Made or Guaranteed by the Candidate... (b) All Other Loans... (c) TOTAL LOANS (add Lines 13(a) and (b))... 14. OFFSETS TO OPERATING **EXPENDITURES** (Refunds, Rebates, etc.) .. 15. OTHER RECEIPTS (Dividends, Interest, etc.) 16. **TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)... 2,20.0,0

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DETAILED SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Disbursements

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	23.8.4.1	L., 1, 2, 7, 6, 4, 5
 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate (b) Of All Other Loans		
 20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees (b) Political Party Committees (c) Other Political Committees (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)) 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) 	2.3.8.4.	1.27.64.5
III. CASH SU	MMARY	
23. CASH ON HAND AT BEGINNING OF REPOR		2.10.7
24 TOTAL RECEIPTS THIS PERIOD (from Line 1 25. SUBTOTAL (add Line 23 and Line 24)	6, page 3)	L., 22,000
 TOTAL DISBURSEMENTS THIS PERIOD (from CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25) 		23841

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ITEMIZED RECEIPTS

SCHEDULE A (FEC Form 3) FOR LINE NUMBER: PAGE OF Use separate schedule(s) (check only one) for each category of the 11a 11b Detailed Summary Page 11c 11d 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) COMMITTEE TO ELECT MICHAEL BICKELMEYER Full Name (Last, First, Middle Initial) Bickelmeyer, Michae Mailing Address Date of Receipt 12540 Deer Creek Drive A.PT. 103 State Zip FEC ID number of contributing federal political committee. Amount of Each Receipt this Period Name of Employer Occupation US Securi Security Officen Receipt For: Election Cycle to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address ID VD City State Zip Code FEC ID number of contributing federal political committee. Amount of Each Receipt this Period Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing federal political committee. Amount of Each Receipt this Period Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE OF Use separate schedule(s) (check only one) 18 19a 20a

ITEMIZED DISBURSEMENTS for each category of the Detailed Summary Page 19b 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) EE TO ELECT MICHAEL BICKELMEYER Date of Disbursement Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) B. Date of Disbursement Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Date of Disbursement Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: Disbursement For: House Senate Primary General President Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

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SCHEDULE C (FEC Form 3) LOANS

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

PAGE OF FOR LINE NUMBER: (check only one) 13a

NAME OF COMMITTEE (In I	Full)	131
LOAN SOURCE FULL No	ame (Last, First, Middle Initial)	IAEL BICKELMEYER
The state of the s	arrie (Cast, First, Middle Initial)	Election:
		Primary
Mailing Address		General
		Other (specify)
City	State	ZIP Code
		ZIF Gode
Original Amount of Loan		
Original Amount of Loan	- I dyli	nent To Date Balance Outstanding at Close of This Peri
		Substitute Constanting at Close of This Peri
TERMS		
Date Incur	red Dat	te Due Interest Pata
M_W \ D \ L		Interest Rate Secured:
		% (apr)
List All Endorsers or Gu	arantors (if any) to Loan Source	Yes N
 Full Name (Last, First, 	Middle Initial)	Name of Employer
A. 111		Table of Employed
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed
		Outstanding:
2. Full Name (Last, First, I	Viddle Initial)	Name of Employer
\$ 4 ° 41		traine or Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed
-		Outstanding:
3. Full Name (Last, First, N	Middle Initial)	Name of Employer
Adollin A.I.I.		Traine of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed
		Outstanding:
. Full Name (Last, First, M	liddle Initial)	Name of Employer
Mailing Address		
Maining Address		Occupation
City	State ZIP Code	Amount Guaranteed
		Outstanding:
TOTALS This Period This	Page (ontiones	
	r aga (optional)	•
ALS This Period (last page	in this line only)	
ry outstanding balance only	y to LINE 3, Schedule D. for this line	s. If no Schedule D, carry forward to appropriate line of Summary.
18	and the same	no Schedule D, carry forward to appropriate line of Summary.

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SCHEDULE C-1 (FEC Form 3) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page of Schedule C

NAME OF COMMISSION, Washington, D.C. 20463			Page of Schedule C
NAME OF COMMITTEE (In Full)		FEC	IDENTIFICATION NUMBER
COMMITTEE TO ELECT MECH	HAEL BICKELME	YER C	0,0,5,5,2,5,0,5
LENDING INSTITUTION (LENDER)	Amount of Loan	1	
Full Name		V-V-7-7	Interest Rate (APR)
Mailing Address	<u>Lagrage</u>		<u></u> %
maining Address	Date Incurred or Established	MTW	Lassasa Varan
City State Zip Code	Date Due		رست المستديا
A. Has loan been restructured? No Yes	If yes, date originally incurre	d WYW	[LANDANA)
B. If line of credit,	Total		
Amount of this Draw:	Outstanding Balance:		
C. Are other parties secondarily liable for the debt incurre No Yes (Endorsers and guarantors mus	t be reported on Schedule C.)		
D. Are any of the following pledged as collateral for the loproperty, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other No Yes If yes, specify:	pan: real estate, personal		lue of this collateral?
		Does the lende	r have a perfected security
E. Are any future contributions or future receipts of interes	it income pledged as	interest in it?	No Yes
collateral for the loan? No Yes If yes, spe	ecify:	What is the es	stimated value?
		<u> </u>	r_r_n_r
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:		
Date account established:	Address:		
M ₂ M , D ₂ D , A ₂	City, State, Zip:		
F. If neither of the types of collateral described above was exceed the loan amount, state the basis upon which this	pledged for this loan, or if the s loan was made and the basis	amount pledg s on which it a	led does not equal or issures repayment.
G. COMMITTEE TREASURER		D. 4.77	
Typed Name Signature		DATE /	الممممعما الممم
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION:			
I. To the best of this institution's knowledge, the term are accurate as stated above	s of the loan and other information	ation regarding	the extension of the loan
The foan was made on terms and conditions (include similar extensions of credit to other borrowers of could be similar extensions of credit to other borrowers of could be similar extensions of credit to other borrowers of complied with the requirements set forth at 11 CFR	ding interest rate) no more favo omparable credit worthiness.	orable at the tir	ne than those imposed for
OTHORIZED REPRESENTATIVE		DATE	
yped Name Signature Title			Lessand Land

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SCHEDULE D (FEC Form 3) PAGE OF (Use separate **DEBTS AND OBLIGATIONS** schedule(s) FOR LINE NUMBER: (check only one) for each **Excluding Loans** 9 numbered line) NAME OF COMMITTEE (In Full) 10 COMMITTEE TO ELECT MICHAEL BICKELMEYER A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address

Zip Code

State

	Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
1)	SUBTOTALS This Period This Page (optional)	
2)	TOTALS This Period (last page this line number only)	
3)	TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4)	ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	
		EEC Cabala D. F.

Payment This Period

Zip Code

Outstanding Balance at Close of This Period

Nature of Debt (Purpose):

City

Mailing Address

City

State

Outstanding Balance Beginning This Period

Amount Incurred This Period

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

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

C	OMMITTEE	ign Committee (In Full) TO ELECT	From:	ering Period:	То:	
/ /	IICHAEL B	TCKELMEY	ER OY		9 67 6	11 267
		Committe	e Name		(a) Line No. 11(a) Total Contributions From Indiv/Persons Other That Political Committees	n From Political Part
4					1 onucal Committees	Committees
3	Column Total Last Page	Only				
-	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A		220.00	220.00			
В						
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(i) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized
A				220.00	238.41	Committees
В						
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other
Α			·		t any committees	Political Committees
В						
***************************************	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligatior Owed TO the Committee
4			238.41	21.07	2.66	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
3						
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			~
1						