

# 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

Crescent Hardy for Congress

ADDRESS (number and street) ▼

PO Box 753941

Check if different than previously reported. (ACC)

Las Vegas

NV

89136

2. **FEC IDENTIFICATION NUMBER** ▼

C C00550608

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

NV

04

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 11 / 04 / 2014 in the State of NV

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

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

Election on / / in the State of

5. Covering Period

10 / 01 / 2014 through 10 / 15 / 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 Chrissie Hastie

Signature of Treasurer Chrissie Hastie

[Electronically Filed]

Date

10 / 23 / 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.

Office Use Only									
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Crescent Hardy for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2014 To: M M / D D / Y Y Y Y 10 / 15 / 2014

	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))....	8200.00	292459.88
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	3250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	8200.00	289209.88
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	18220.67	263156.68
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	650.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	18220.67	262506.68
8. Cash on Hand at Close of Reporting Period (from Line 27).....	28104.20	
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).....	32811.71	

**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

**Crescent Hardy 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).....	4600.00	248450.28
(ii) Unitemized.....	500.00	10000.00
(iii) TOTAL of contributions from individuals ▶	5100.00	258450.28
(b) Political Party Committees.....	100.00	100.00
(c) Other Political Committees (such as PACs).....	3000.00	33909.60
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	8200.00	292459.88
<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	1406.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	1406.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	650.00
<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>	8200.00	294515.88

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	18220.67	263156.68
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	2250.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	3250.00
21. OTHER DISBURSEMENTS .....	0.00	5.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	18220.67	266411.68

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	38124.87
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8200.00
25. SUBTOTAL (add Line 23 and Line 24).....	46324.87
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	18220.67
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	28104.20

**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 22
	<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)  
**Crescent Hardy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**D. Paul Anderson**

Mailing Address 6180 Loyal Royal Court

City Las Vegas State NV Zip Code 89131

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

Name of Employer Anderson PC Occupation IT Services

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 14 / 2014

**Transaction ID : 41017.C559**

Amount of Each Receipt this Period  
1000.00

Receipt

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

Mailing Address 1405 Chuck Wagon Run

City Mesquite State NV Zip Code 89034

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  
385.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 14 / 2014

**Transaction ID : 41017.C560**

Amount of Each Receipt this Period  
100.00

Receipt

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

Mailing Address 200 East Virgin Street

City Bunkerville State NV Zip Code 89007

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  
1200.00

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

**Transaction ID : 41017.C556**

Amount of Each Receipt this Period  
700.00

Receipt

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

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

1800.00

**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 22
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. Craig Baker</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 113 East Elko Avenue		<b>Transaction ID : 41008.C544</b>
City Baker	State NV	Zip Code 89311
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Baker Ranch	Occupation Rancher	Receipt
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. Gary Vause</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 1951 South Rainbow Blvd. #200		<b>Transaction ID : 41017.C554</b>
City Las Vegas	State NV	Zip Code 89146
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2000.00	
Name of Employer Little Scholar	Occupation Owner	Receipt
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>C. Jennifer Brotherson</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address PO Box 7272		<b>Transaction ID : 41017.C557</b>
City Bunkerville	State NV	Zip Code 89007
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 300.00	
Name of Employer Retired	Occupation Retired	Receipt
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2550.00
<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 7 OF 22
	<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)  
**Crescent Hardy for Congress**

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

Mailing Address 9397 Thunder Basin Avenue

City Las Vegas State NV Zip Code 89149

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

Name of Employer .Information Requested Occupation .Information Requested

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  
 10 / 10 / 2014

**Transaction ID : 41017.C558**

Amount of Each Receipt this Period  
 Receipt 250.00

**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).....

250.00

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 8 OF 22
	<input type="checkbox"/> 11a 12 <input checked="" 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)  
**Crescent Hardy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**White Pine County Republican CentralComm**

Mailing Address 1379 Mill Street

City Ely State NV Zip Code 89301

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

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  
 10 / 10 / 2014

**Transaction ID : 41017.C552**

Amount of Each Receipt this Period  
 Receipt 100.00

**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).....

100.00

100.00



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

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

FOR LINE NUMBER: PAGE 9 OF 22  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Cresent Hardy for Congress**

**A. Continuing A Majority PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5915 Eastman Avenue #100  
 City State Zip Code  
 Midland MI 48640  
 FEC ID number of contributing federal political committee. **C** C00350462  
 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  
 10 / 10 / 2014  
**Transaction ID : 41017.C548**  
 Amount of Each Receipt this Period  
 Receipt 1000.00

**B. BLAINE PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 96  
 City State Zip Code  
 Saint Elizabeth MO 65075  
 FEC ID number of contributing federal political committee. **C**  
 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  
 10 / 10 / 2014  
**Transaction ID : 41017.C549**  
 Amount of Each Receipt this Period  
 Receipt 1000.00

**C. FROG-Jump PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 651374  
 City State Zip Code  
 Sterling VA 20165  
 FEC ID number of contributing federal political committee. **C** C00504365  
 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  
 10 / 10 / 2014  
**Transaction ID : 41017.C553**  
 Amount of Each Receipt this Period  
 Receipt 1000.00

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

3000.00  
 3000.00

**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 10 OF 22			
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kent Alexander</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address PO Box 157			Amount of Each Disbursement this Period 55.09
City Saucier	State MS	Zip Code 39574-	Transaction ID : 41008.E485
Purpose of Disbursement Printer Ink	Category/ Type		
Candidate Name			PRINTER INK
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. Mesquite Lumber</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 102 West Mesquite Boulevard			Amount of Each Disbursement this Period 223.18
City Mesquite	State NV	Zip Code 89027-	Transaction ID : 41022.E572
Purpose of Disbursement Office Supplies	Category/ Type		
Candidate Name			OFFICE SUPPLIES
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. Red Rock Strategies</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 9500 West Flamingo Road #203			Amount of Each Disbursement this Period 3191.25
City Las Vegas	State NV	Zip Code 89147-	Transaction ID : 41008.E491
Purpose of Disbursement Consulting Fundraising	Category/ Type		
Candidate Name			CONSULTING FUNDRAISING
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).....	3469.52
<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 11 OF 22	
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. In Compliance Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address PO Box 751271		Amount of Each Disbursement this Period 2250.00
City Las Vegas	State NV	
Zip Code 89136-	Purpose of Disbursement Compliance Consulting	<b>Transaction ID : 41008.E498</b>
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)	COMPLIANCE CONSULTING
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Red Rock Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 9500 West Flamingo Road #203		Amount of Each Disbursement this Period 5000.00
City Las Vegas	State NV	
Zip Code 89147-	Purpose of Disbursement Consulting Management	<b>Transaction ID : 41008.E492</b>
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)	CONSULTING MANAGEMENT
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105-	Purpose of Disbursement Merchant Processing Fees	<b>Transaction ID : 41017.E564</b>
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)	MERCHANT PROCESSING FEES
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7255.75
<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 12 OF 22	
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jesus Marquez Campaign</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 6604 Pepperidge Way			Amount of Each Disbursement this Period 500.00
City Las Vegas	State NV	Zip Code 89108-	Transaction ID : 41017.E565
Purpose of Disbursement Door To Door GOTV		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	DOOR TO DOOR GOTV
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kent Alexander</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address PO Box 157			Amount of Each Disbursement this Period 2500.00
City Saucier	State MS	Zip Code 39574-	Transaction ID : 41008.E483
Purpose of Disbursement Consulting Grassroots		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CONSULTING GRASSROOTS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>c. Vinyltech Signs &amp; Decals Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014
Mailing Address 111 Industrial Park Road			Amount of Each Disbursement this Period 2302.50
City Prattville	State AL	Zip Code 36067-	Transaction ID : 41008.E489
Purpose of Disbursement Yard Signs		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	YARD SIGNS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5302.50
<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 13 OF 22			
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. In Compliance Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address PO Box 751271			Amount of Each Disbursement this Period 3.80
City Las Vegas	State NV	Zip Code 89136-	Transaction ID : 41008.E500
Purpose of Disbursement Printing		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PRINTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Red Rock Strategies</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 9500 West Flamingo Road #203			Amount of Each Disbursement this Period 107.80
City Las Vegas	State NV	Zip Code 89147-	Transaction ID : 41008.E493
Purpose of Disbursement Travel		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	TRAVEL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. Cox Communications</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 750 North Rancho Drive			Amount of Each Disbursement this Period 327.08
City Las Vegas	State NV	Zip Code 89106-	Transaction ID : 41022.E578
Purpose of Disbursement Telephone & Internet		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	TELEPHONE & INTERNET
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	438.68
<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 14 OF 22			
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. In Compliance Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address PO Box 751271		Amount of Each Disbursement this Period 42.34
City Las Vegas	State NV	
Zip Code 89136-	Purpose of Disbursement Travel	Transaction ID : 41008.E499
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)	TRAVEL
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Red Rock Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 9500 West Flamingo Road #203		Amount of Each Disbursement this Period 217.82
City Las Vegas	State NV	
Zip Code 89147-	Purpose of Disbursement Printing	Transaction ID : 41008.E494
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)	PRINTING
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Loves Country Store</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 12501 Apex Great Basin Way		Amount of Each Disbursement this Period 58.00
City Las Vegas	State NV	
Zip Code 89105-	Purpose of Disbursement Travel	Transaction ID : 41022.E577
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)	TRAVEL
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	318.16
<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 15 OF 22			
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. Red Rock Strategies</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 9500 West Flamingo Road #203			Amount of Each Disbursement this Period 25.48
City Las Vegas	State NV	Zip Code 89147-	Transaction ID : 41008.E497
Purpose of Disbursement Telephone	Category/ Type		
Candidate Name			TELEPHONE
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. Loves Country Store</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address 12501 Apex Great Basin Way			Amount of Each Disbursement this Period 52.00
City Las Vegas	State NV	Zip Code 89105-	Transaction ID : 41022.E575
Purpose of Disbursement Travel	Category/ Type		
Candidate Name			TRAVEL
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. Naka Sushi</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 8540 W Lake Mead Boulevard			Amount of Each Disbursement this Period 52.21
City Las Vegas	State NV	Zip Code 89128-	Transaction ID : 41022.E566
Purpose of Disbursement Meals	Category/ Type		
Candidate Name			MEALS
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).....	129.69
<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 16 OF 22			
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. Loves Country Store</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 12501 Apex Great Basin Way		Amount of Each Disbursement this Period 70.00
City Las Vegas	State NV Zip Code 89105-	
Purpose of Disbursement Travel	Category/Type	<b>Transaction ID : 41022.E571</b>
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)	TRAVEL
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kent Alexander</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address PO Box 157		Amount of Each Disbursement this Period 489.00
City Saucier	State MS Zip Code 39574-	
Purpose of Disbursement Travel	Category/Type	<b>Transaction ID : 41008.E484</b>
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)	TRAVEL
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Chevron</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 9991 West Charleston Boulevard		Amount of Each Disbursement this Period 25.00
City Las Vegas	State NV Zip Code 89117-	
Purpose of Disbursement Travel	Category/Type	<b>Transaction ID : 41022.E568</b>
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)	TRAVEL
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	584.00
<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 17 OF 22	
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. Red Rock Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 9500 West Flamingo Road #203		Amount of Each Disbursement this Period 135.13
City Las Vegas	State NV	Zip Code 89147-
Purpose of Disbursement Office Supplies	Category/Type	
Candidate Name	Transaction ID : 41008.E495	
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)	OFFICE SUPPLIES
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Naka Sushi</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 8540 W Lake Mead Boulevard		Amount of Each Disbursement this Period 52.21
City Las Vegas	State NV	Zip Code 89128-
Purpose of Disbursement Meals	Category/Type	
Candidate Name	Transaction ID : 41022.E573	
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)	MEALS
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Rebel Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 208 East Tropicana Avenue		Amount of Each Disbursement this Period 51.00
City Las Vegas	State NV	Zip Code 89109-
Purpose of Disbursement Travel	Category/Type	
Candidate Name	Transaction ID : 41022.E569	
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)	TRAVEL
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	238.34
<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 18 OF 22			
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. Shell Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 910 Mesquite Boulevard		Amount of Each Disbursement this Period 64.00
City Mesquite	State NV	
Zip Code 89027-	Purpose of Disbursement Travel	<b>Transaction ID : 41022.E574</b>
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)	TRAVEL
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Red Rock Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 9500 West Flamingo Road #203		Amount of Each Disbursement this Period 122.50
City Las Vegas	State NV	
Zip Code 89147-	Purpose of Disbursement Catering	<b>Transaction ID : 41008.E496</b>
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)	CATERING
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Shell Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 910 Mesquite Boulevard		Amount of Each Disbursement this Period 67.00
City Mesquite	State NV	
Zip Code 89027-	Purpose of Disbursement Travel	<b>Transaction ID : 41022.E576</b>
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)	TRAVEL
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	253.50
<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 19 OF 22			
	<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)  
**Crescent Hardy for Congress**

Full Name (Last, First, Middle Initial) <b>A. Loves Country Store</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2014</b>
Mailing Address 12501 Apex Great Basin Way		Amount of Each Disbursement this Period <b>57.00</b>
City Las Vegas State NV Zip Code 89105-	Category/Type <b>TRAVEL</b>	
Purpose of Disbursement Travel		Transaction ID : 41022.E567
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	Category/Type	
Purpose of Disbursement		
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	Category/Type	
Purpose of Disbursement		
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).....	<b>57.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>18047.14</b>

**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) **Crescent Hardy for Congress** Transaction ID : **LS40627.C408**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Crescent Hardy</b>	<b>[PERSONAL FUNDS]</b>	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 753941		

City	State	ZIP Code
Las Vegas	NV	89136-

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1406.00	0.00	1406.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 09 / Y 2014 Y	M M / D D / ONDEMAND	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: <input style="width:150px" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width:150px" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width:150px" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width:150px" type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	1406.00
<b>TOTALS</b> This Period (last page in this line only).....	1406.00

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

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**Crescent Hardy for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Red Rock Strategies</b>		Nature of Debt (Purpose): Advertisement
Mailing Address 9500 West Flamingo Road #203		
City	State	Zip Code
Las Vegas	NV	89147-

Outstanding Balance Beginning This Period	<b>Transaction ID : LS40709.E324</b>	
<input type="text" value="78.86"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="78.86"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Red Rock Strategies</b>		Nature of Debt (Purpose): Consulting Management
Mailing Address 9500 West Flamingo Road #203		
City	State	Zip Code
Las Vegas	NV	89147-

Outstanding Balance Beginning This Period	<b>Transaction ID : LS40709.E323</b>	
<input type="text" value="19500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="19500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>FBM Inc.</b>		Nature of Debt (Purpose): Consulting Fundraising
Mailing Address 9117 Vintage Wine Avenue		
City	State	Zip Code
Las Vegas	NV	89148-

Outstanding Balance Beginning This Period	<b>Transaction ID : LS40709.E325</b>	
<input type="text" value="2500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2500.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="22078.86"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Crescent Hardy for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>King Strategic Communications Inc.</b>		Nature of Debt (Purpose): Printing & Postage
Mailing Address 750 Cross Pointe Boulevard #N		
City Columbus	State OH	Zip Code 43230-

Outstanding Balance Beginning This Period 9326.85	<b>Transaction ID : LS40709.E321</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 9326.85

B. 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

C. 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

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	9326.85
2) <b>TOTALS</b> This Period (last page this line number only) .....	31405.71
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	1406.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	32811.71