Image# 14952417017 PAGE 1 / 27

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

			Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Every Voice Action			
ADDRESS (number and street)	1133 19th St., N.W.		
Check if different	9th Floor		
than previously reported. (ACC)	Washington		DC 20036 -
2. FEC IDENTIFICATION NU	MBER ▼ C	CITY 	STATE ▲ ZIP CODE ▲
C C00566208	3.	IS THIS REPORT X (N) OF	AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report	eb 20 (M2) May 20 (M	5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On:	Mar 20 (M3) Jun 20 (M6	Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15	Α	pr 20 (M4) Jul 20 (M7)	Oct 20 (M10) Jan 31 (YE)
Quarterly Report (Q	1) (c) 12-Day	Primary (12P)	X General (12G) Runoff (12R)
July 15 Quarterly Report (Q2	PRE-Election	Convention (12C)	
October 15 Quarterly Report (Q	Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report (YE		etion on 11 04	in the 2014 State of DC
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:		Runoff (30R) Special (30S)
Termination Report (TER)		etion on	in the State of
5. Covering Period 10	01 2014		M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined this	s Report and to the best	of my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasurer	David Donnelly		
Signature of Treasurer David	Donnelly	[Electronically Filed]	Date 10 / 23 / 2014
NOTE: Submission of false, errone	ous, or incomplete informate	tion may subject the person signing	this Report to the penalties of 2 U.S.C. §437g.
Office			FEC FORM 3X
Use Only			Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISRUPSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name **Every Voice Action** 10 2014 10 2014 Report Covering the Period: 15 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 0.00 January 1, 2014 (b) Cash on Hand at 700484.55 Beginning of Reporting Period..... 2290250.34 708939.09 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 1409423.64 2290250.34 6(a) and 6(c) for Column B)..... 574359.61 1455186.31 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 835064.03 835064.03 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Every Voice Action

Report Covering the Period: From: 10	01 2014 T	To: 10 15 2014
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	1000.00	0000.00
(i) Itemized (use Schedule A)	1000.00	6000.00
/// · · · · · · · · · · · · · · · · · ·	204.00	2150.00
(ii) Uniternized	604.00	2130.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	1604.00	8150.00
Lines Tr(a)(i) and (ii)	, 1004.00	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		0450.00
Totals to Line 33, page 5)	1604.00	8150.00
2. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)	0.00	0.00
(Carry Totals to Line 37, page 5)	0.00	0.00
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts	3.00	
(Dividends, Interest, etc.)	707335.09	2282100.34
B. Transfers from Non-Federal and Levin Funds	7	7
(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
		2290
). Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	708939.09	2290250.3

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	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)		outonaur rour to buto
	(i) Federal Share	0.00	0.00
	(ii) Non Fodoval Chara	0.00	0.00
	(ii) Non-Federal Share(b) Other Federal Operating		3.00
	Expenditures	701.69	158879.10
	(c) Total Operating Expenditures	701.69	158879.10
2	(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	701.09	138679.10
	Committees	0.00	0.00
3.	Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
4.	Independent Expenditures		
5.	(use Schedule E)	530322.83	977274.83
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
	Loans MadeRefunds of Contributions To:	0.00	0.00
	(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 Defunds		
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	0.00
9.	Other Disbursements	43335.09	319032.38
0.	Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	0.00	0.00
	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
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	574359.61	1455186.31
2.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	574359.61	1455186.31

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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	1604.00	8150.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1604.00	8150.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	701.69	158879.10
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	701.69	158879.10

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

	FOR LINE NUMBER: PAGE 6 OF									
Use separate schedule(s)	(ch	eck only	or	ne)						
for each category of the Detailed Summary Page	×	11a		11b		11c		12		
,,g.	ı	13		14		15		16		17

	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) Every Voice Action		
Full Name (Last, First, Middle Initial) Robin Shanus Mailing Address 75 Remsen St City Brooklyn FEC ID number of contributing federal political committee. Name of Employer self Receipt For: 2014 Primary General Other (specify)	State Zip Code NY 11201-3401 C Occupation lawyer Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 10 09 2014 Transaction ID: VN8AJD8MZ38 Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) Mailing Address City	State Zip Code	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Mailing Address		Date of Receipt
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	1000.00
TOTAL This Period (last page this line numb	er only)	1000.00

SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 7 OF 27
TEMIZED RECEIPTS	Use separate schedule(s) for each category of the	(check only one)
I LIVIIZED ITECLIF 13	Detailed Summary Page	11a 11b 11c 12
Any information copied from such Reports and State or for commercial purposes, other than using the na		
NAME OF COMMITTEE (In Full)	ino and address of any pointed committee	o to concer contributions from cash committee.
Every Voice Action		
/		
Full Name (Last, First, Middle Initial) Levery Voice		Date of Receipt
Mailing Address 1133 19th St NW		M = M / D = D / Y = Y = Y
FI 9	State Zip Code	10 01 2014
Washington	DC 20036-3612	Transaction ID : VN8AJD9GN89 Amount of Each Receipt this Period
FFC ID asserber of contribution	C	15000.00
Name of Employer O	ccupation	
Receipt For: 2014	ggregate Year-to-Date ▼	
Primary X General		*Payment to vendor-Luis Navarro as an In-kind
Other (specify) ▼	194551.12	contribution
Full Name (Last, First, Middle Initial)		
3. CWA Working Voices		Date of Receipt
Mailing Address 501 3rd St NW		10 02 2014
City	State Zip Code	Transaction ID : VN8AJD7F794
Washington	DC 20001-2760	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100000.00
lederal political committee.		
Name of Employer O	ccupation	
Receipt For: 2014	.ggregate Year-to-Date ▼	
Primary General		1
Other (specify) ▼	100000.00	
Full Name (Last, First, Middle Initial)		
. HOUSE MAJORITY PAC		Date of Receipt
Mailing Address 700 13th St NW Ste 600		10 05 2014
City	State Zip Code	Transaction ID : VN8AJD8C4N1
Washington	DC 20005-3960	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	8188.67
Name of Employer O	ccupation	
Receipt For: 2014	ggregate Year-to-Date ▼	
Primary General	19616.09	* In-Kind: *In-kind: Public Opinion Research
Other (specify) ▼	19010.09	
SUBTOTAL of Receipts This Page (optional)	······	123188.67

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

1mage# 14952417024 PAGE 8 / 27

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SA17

Transaction ID: VN8AJD9GN89

see transaction VN7BA9WRZY3

Form/Schedule: Transaction ID:

SCHEDULE A (FEC Form 3	3X)	Use separate schedule(s)			FOR LINE NUMBER: PAGE 9 OF 27 (check only one)							
TEMIZED RECEIPTS		for each category of the Detailed Summary Page		11a	_	e) 11b	110	с Г	12			
		Dotailed Guillilary Fage		13		14	15		16	X 17		
Any information copied from such Reports or for commercial purposes, other than usi												
NAME OF COMMITTEE (In Full) Every Voice Action												
Full Name (Last, First, Middle Initial) A. Jerry Kohlberg				Date o	of Red	ceipt						
Mailing Address 111 Radio Circle Dr				10	/	07			2014	Y		
City	State	Zip Code		Tran	sactio	on ID	: VN8A	JD87	CA2			
Mount Kisco	NY	10549-2609		Amour	nt of E	Each	Receip	t this	Period			
FEC ID number of contributing federal political committee.	C					,			50000	0.00		
Name of Employer	Occupation	1										
N/A	Retired											
Receipt For: 2014	Aggregate	Year-to-Date ▼										
Primary General		F0000 00	7									
Other (specify) ▼		50000.00	4									
Full Name (Last, First, Middle Initial) 3. Mayday PAC				Date of	of Red	ceipt						
Mailing Address PO Box 380444				M = N	/	07			2014	Υ		
City	State	Zip Code			sactio		: VN8A					
Cambridge	MA	02238-0444		Amour								
FEC ID number of contributing federal political committee.	C co	0562587				,		4	144000	0.00		
Name of Employer	Occupation	l										
Receipt For: 2014 Primary General	Aggregate	Year-to-Date ▼										
Other (specify) ▼		458000.00										
Full Name (Last, First, Middle Initial) C. Matt Cutts	-			Date of	of Red	ceipt						
Mailing Address 554 Glen Alto Dr				M = N	/	08			2014	Y		
City	State	Zip Code		Tran	sacti		: VN8/					
Los Altos	CA	94024-4137		Amour	nt of E	Each	Receip	t this	Period			
FEC ID number of contributing federal political committee.	C					,			50000	0.00		
Name of Employer	Occupation	<u> </u>										
Google	Software E	ngineer										
Receipt For: 2014	Aggregate	Year-to-Date ▼										
Primary ∑ General Other (specify) ▼		50000.00										
SUBTOTAL of Receipts This Page (option	nal)		<u> </u>					5	44000	.00		
TOTAL This Period (last page this line nu			_	T		-						

SCHEDULE A (FEC Form 3	X)	FOR LINE NUMBER: PAGE 10 OF 27						
TEMIZED RECEIPTS	Use separate schedule(s)	(check only one)						
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b 11c 12						
		13 14 15 16 X 17						
	and Statements may not be sold or used by any pe							
	g the name and address of any political committee	to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)								
Every Voice Action								
Full Name (Last, First, Middle Initial)								
A. Jonathan Lyon		Date of Receipt						
Mailing Address 11 Robbins Rd		M = M / D = D / Y = Y = Y						
City	State Zip Code	10 08 2014						
Lexington	MA 02421-5905	Transaction ID: VN8AJD8GHN9						
		Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	10000.00						
·	Occupation							
Name of Employer	Occupation							
Mt Independence Investments Receipt For: 2014	Investor	_						
Primary General	Aggregate Year-to-Date ▼							
Other (specify) ▼	10000.00							
		1						
Full Name (Last, First, Middle Initial)								
3. Marcy Carsey		Date of Receipt						
Mailing Address 11601 Wilshire Blvd Ste 1840		10 09 _2014 _						
City	State Zip Code	10 09 2014 Transaction ID : VN8AJD8X9S6						
Los Angeles	CA 90025-1754	Amount of Each Receipt this Period						
FEC ID number of contributing	0							
federal political committee.	C	10000.00						
Name of Employer	Occupation							
Carsey Werner	Producer							
Receipt For: 2014	Aggregate Year-to-Date ▼							
Primary General	35 .5							
Other (specify) ▼	10000.00							
Full Name (Last, First, Middle Initial)								
c. Every Voice		Date of Receipt						
Mailing Address 1133 19th St NW		M = M / D = D / Y = Y = Y						
FI 9		10 15 2014						
City	State Zip Code DC 20036-3612	Transaction ID: VN8AJDC1WG2						
Washington	20036-3612	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С	20146.42						
Name of Employer	Occupation							
Receipt For: 2014								
Primary Seneral	Aggregate Year-to-Date ▼	* In-Kind: in-kind staff time & associated overhe						
Other (specify)	214697.54	m-rand. m-rand stantime & associated overne						
	·							
SUBTOTAL of Receipts This Page (options	al)	40146.42						
		707335.09						
TOTAL This Period (last page this line nur	nber only)	, 107333.09						

SCHEDULE B (FEC Form 3X)		, FOR LINE	NUMBER:	PAGE 11 OF 27
ITEMIZED DISBURSEMENTS	Use separate schedule for each category of the	(s) (check only	/ one)	
	Detailed Summary Page		22 23 28b	24 25 26 30b
Anni information conicd from such Danada and	Otatamanta manu nat ha asld au			
Any information copied from such Reports and or for commercial purposes, other than using the				
NAME OF COMMITTEE (In Full)				
Every Voice Action				
/				
Full Name (Last, First, Middle Initial)			Date of Disbursem	nent
A. Amalgamated Bank			M M / D D	
Mailing Address 275 7th Ave			10 01	2014
City New York	State Zip Code NY 10001-6708		Transaction ID :	VN7BA9W7X58
Purpose of Disbursement	10001-0706			
Bank fee		001	Amount of Each D	isbursement this Period
Candidate Name		Category/		20.00
000		Type		20.00
Office Sought: House Dis	bursement For: 2014	ı		
President	Primary	l		
State: District:	Curior (oposity)			
Full Name (Last, First, Middle Initial)				
B. Amalgamated Bank			Date of Disbursen	nent
			M M / D D	
Mailing Address 275 7th Ave			10 02	2014
City	State Zip Code		Transaction ID	VALZD A OMZV 40
New York	NY 10001-6708		Transaction ID :	VN/BA9W/X4U
Purpose of Disbursement Bank fee		001	Amount of Foob F	Nichuracment this Devied
Candidate Name		001	Amount of Each L	isbursement this Period
Carlanate Hame		Category/ Type		20.00
Office Sought: House Dis	bursement For: 2014	-7/2-2	,	,
Senate	Primary General	I		
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) C. Amalgamated Bank			Date of Disbursem	nent
Amalgamated Bank			M M / D D	
Mailing Address 275 7th Ave			10 03	2014
0::				
City New York	State Zip Code NY 10001-6708		Transaction ID :	VN7BA9WK1R2
Purpose of Disbursement	10001 0100			
Bank fee		001	Amount of Each D	Disbursement this Period
Candidate Name		Category/		20.00
Office Sought: House Dis	bursement For: 2014	Туре		20.00
Senate	Primary Seneral	I		
President	Other (specify)	.		
State: District:				
SUBTOTAL of Disbursements This Page (option	onal)	·····		60.00
TOTAL This Deviced (leading and the first	, and d			
TOTAL This Period (last page this line numbe	r oniy)			

SCHEDULE B (FEC Form 3X)	Hee conc	IE NUMBER: PAGE 12 OF 27						
ITEMIZED DISBURSEMENTS	for each c	ate schedule(s) ategory of the ummary Page	(check only X 21b 27	one) 22 28a	23 28b	24 28c	25 29	20
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NAME OF COMMITTEE (In Full) Every Voice Action	addit	22 o. arry point		25 001		Guoii	, J	
Full Name (Last, First, Middle Initial)				·	D:-/	. ma = :- 1		
A. Amalgamated Bank				Date of	Disburse		Y	V
Mailing Address 275 7th Ave				10	0		2014	
,	State NY	Zip Code 10001-6708		Trans	action ID	: VN7BA9W	/K1T8	
Purpose of Disbursement Bank fee		.0001-0700	001	Amount	of Each	Diebureama	nt thic D	Opriod
Candidate Name				Amount	oi Each	Disburseme	ni inis P	ellog
			Category/ Type		7		20.	.00
Senate President	nent For: 20 Primary Other (speci	X General						
State: District:								
Full Name (Last, First, Middle Initial) B. Amalgamated Bank					Disburse			
Mailing Address 275 7th Ave				10	0	7	2014	Y
New York	State NY	Zip Code 10001-6708		Trans	action ID	: VN7BA9V	/K1Y9	
Purpose of Disbursement Bank fee			001	Amount	of Each	Disburseme	nt this P	eriod
Candidate Name			Category/ Type				15.	.00
Senate	nent For: 20 Primary Other (speci	X General						
Full Name (Last, First, Middle Initial) C. Amalgamated Bank					Disburse			
Mailing Address 275 7th Ave				10	0		2014	Y
New York	State NY	Zip Code 10001-6708		Trans	action ID	: VN7BA9V	/K1X1	
Purpose of Disbursement Bank fee			001	Amount	of Each	Disburseme	nt thie D	Period
Candidate Name			Category/ Type	Amount	J. Lauli	Dissuiscille	15.	
Senate	nent For: 20 Primary Other (speci	X General						
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).				Ë	7		50.0	00

SCHEDULE B (FEC Form 3X)						PAGE	13	OF 2	27		
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only one)								
		Summary Page	X 2	11b	22 28a	23 28b		24 28c	25 29		26 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam											
NAME OF COMMITTEE (In Full)		J. w			2.2 00111						
Every Voice Action											
Full Name (Last, First, Middle Initial)					- · ·	5					
A. Amalgamated Bank					Date of						
Mailing Address 275 7th Ave					10	/ D	9		2014	Y	
City	State	Zip Code			Tranco	ction ID	. \/NI	7D A O.W.			_
	NY	10001-6708			Hallsa	CHOILID	. VIN	DASW	/K1VV4		
Purpose of Disbursement Bank fee			001] A	Amount	of Each	Disbu	urseme	nt this	Period	
Candidate Name			Category/ Type					4	1	5.00]
	nent For: Primary Other (spe	General	.,,,,,								
State: District:											
Full Name (Last, First, Middle Initial)											
B. Amalgamated Bank] [Date of						
Mailing Address 275 7th Ave					10		10		2014	Y	
New York	State NY	Zip Code 10001-6708			Transa	ction ID) : VN	7BA9W	√K1V6		
Purpose of Disbursement Bank fee			001	1	Amount	of Each	Disbu	urseme	nt this	Period	
Candidate Name			Category/ Type	11				4	6	0.00	
	nent For: Primary Other (spe	X General									
Full Name (Last, First, Middle Initial)											
C. American Express Establishment S	Services	3		[Date of	Disburse	ement				
Mailing Address PO Box 53852					1 <u>0</u>	/ D	0		2014	Y	
•	State AZ	Zip Code 85072-3852			Transa	ction ID) : VN	7BA9W	 /K1Z7		
Phoenix Purpose of Disbursement	AZ	85072-3852									
Merchant Deposit Fee			003		Amount	of Each	Disbu	urseme	nt this	Period	
Candidate Name			Category/ Type						28	9.15	1
	nent For: Primary Other (spe	X General	••			7					1
SUBTOTAL of Disbursements This Page (optional)						-			36	4.15	7
TOTAL This Period (last page this line number only).						-		7			i

SCHEDULE B (FEC Form 3X)	Hea concrete cohedul-(-)	FOR LINE NUMBER:			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28a 28b	24 25 26 28c 29 30	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full) Every Voice Action	and address of any pollu	our committee to	Sound Contributions	Sacri commutet.	
Full Name (Last, First, Middle Initial)			Date of Disburse	mont	
A. Amalgamated Bank	Amalgamated Bank				
Mailing Address 275 7th Ave			10 14		
,	State Zip Code		Transaction ID	: VN7BA9WQ5K4	
New York Purpose of Disbursement	NY 10001-6708				
Bank fee		001	Amount of Each	Disbursement this Period	
Candidate Name		Category/		60.00	
Office Sought: House Broken	nent For: 2044	Type		00.00	
Senate President	nent For: 2014 Primary General Other (specify)				
State: District:					
Full Name (Last, First, Middle Initial)	longias -		Date of Disburser	ment	
B. American Express Establishment S	bei vices		Date of Disbursei		
Mailing Address PO Box 53852			10 14		
,	State Zip Code		Transaction ID	: VN7BA9WQ5N0	
Phoenix Purpose of Disbursement	AZ 85072-3852				
Merchant Deposit Fee		003	Amount of Each	Disbursement this Period	
Candidate Name		Category/ Type		7.95	
Senate President	nent For: 2014 Primary				
State: District: Full Name (Last, First, Middle Initial)					
C. American Express Establishment S	Services		Date of Disburser		
Mailing Address PO Box 53852			10 14		
Phoenix	State Zip Code AZ 85072-3852		Transaction ID	: VN7BA9WQ5Q6	
Purpose of Disbursement Merchant Deposit Fee		000			
Candidate Name		003 Category/ Type	Amount of Each	Disbursement this Period 29.05	
Senate	nent For: 2014 Primary General Other (specify)	туре	7		
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).				97.00	

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only X 21b 27	•
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full) Every Voice Action	ments may not be sold or used ne and address of any political	by any perso committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) A. Amalgamated Bank Mailing Address 275 7th Ave			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
New York	State Zip Code NY 10001-6708		Transaction ID : VN7BA9X2KE9
Purpose of Disbursement Bank fee Candidate Name	[001 Category/ Type	Amount of Each Disbursement this Period 20.00
Office Sought: House Senate President State: Disburser Senate	ment For: 2014 Primary		
Full Name (Last, First, Middle Initial) B. Mailing Address			Date of Disbursement
	State Zip Code		
Purpose of Disbursement Candidate Name	[Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Senate President State: Disburser	nent For: Primary General Other (specify)	1,700	
Full Name (Last, First, Middle Initial)			Date of Disbursement
Mailing Address			
City Purpose of Disbursement	State Zip Code		
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify)		
SUBTOTAL of Disbursements This Page (optional)		·····•	20.00
TOTAL This Period (last page this line number only))		591.15

SCHEDULE B (FEC Form 3X)	Lloo occupato askastili /-	, FOR LINE			
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(orleast orliny			
	Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c X 29 30k		
Any information copied from such Reports and State or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full)					
Every Voice Action					
Full Name (Last, First, Middle Initial)			Date of Disbursement		
- Luis Navarro	Luis Navarro				
Mailing Address 19121 Treadway Rd			10 02 2014		
City	State Zip Code		Transaction ID : VN7BA9WS017		
Brookeville Purpose of Disbursement	MD 20833-2736				
Consulting		001	Amount of Each Disbursement this Period		
Candidate Name		Category/	45000.00		
000		Туре	15000.00		
Office Sought: House Disburse Senate President	ement For: 2014 Primary General Other (specify)		pd by Every Voice as an in-kind contribution se VN8AJD9GN89		
State: District:					
Full Name (Last, First, Middle Initial)					
B. HOUSE MAJORITY PAC			Date of Disbursement		
Mailing Address 700 13th St NW Ste 600			10 05 2014		
City Washington	State Zip Code DC 20005-3960		Transaction ID : VN8AJD8C4N1I		
Purpose of Disbursement *In-kind: Public Opinion Research			Amount of Each Disbursement this Period		
Candidate Name		Category/ Type	8188.67		
Office Sought: House Disburse Senate President State: District:	ement For: 2014 Primary		* In-Kind Received		
Full Name (Last, First, Middle Initial)			D 1 (D) 1		
C. Every Voice			Date of Disbursement		
Mailing Address 1133 19th St NW FI 9					
City Washington	State Zip Code DC 20036-3612		Transaction ID: VN8AJDC1WG2I		
Purpose of Disbursement in-kind staff time & associated overhead		Amount of Each Disbursement this Period			
Candidate Name		Category/ Type	20146.42		
Office Sought: House Disburse Senate President	ement For: 2014 Primary General Other (specify)	Туре	* In-Kind Received		
State: District:	_				
SUBTOTAL of Disbursements This Page (optional)			43335.09		
			4225 02		
TOTAL This Period (last page this line number only	y)		43335.09		

David Donnelly

Signature

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDIT	JRES				PAGE 17	OF 27
NAME OF COMMITTEE (In Full)				T		4 OF FORM 3X
Every Voice Action						ON NUMBER ▼
•				C	C00566208	
Check if 24-hour report 48-hour report	ort New re	eport Amends repo	ort filed on	M = M	/ D = D /	Y Y Y
Full Name of Payee Buying Time			Dat	te of Publ	lic Distribution/	Dissemination
Mailing Address				10	02	2014
650 Massachusetts Ave NV	V		Am	ount		
Ste 210	State	Zip Code	<u> —</u> г			130691.00
Washington	DC	20001-3728			D: VN7BA9W2	2YH5
Purpose of Expenditure Advertising		Category/ Type 004		10	/ O1	2014
Name of Federal Candidate		Support	Office Sou	ight:	House I	District:
Mike Rounds		Oppose	Pres	sident	X Senate	State: SD
Calendar Year-To-Date Per Election for Office Sought		609554.15	Disbursem 2014		Primary	X General
Full Name of Payee Every Voice Mailing Address 1133 19th St NW				te of Publ	lic Distribution/	Dissemination 2014
FI 9	State	Zip Code	— F			1000.00
City Washington	DC	20036-3612			D: VN7BA9W oursement or C	5X27
Purpose of Expenditure Social Media Advertisement Costs		Category/ Type 004		10 10	02	2014
Name of Federal Candidate		Support	Office Sou	ught:	House	District:
Mike Rounds		X Oppose	Pres	sident	X Senate	State: SD
Calendar Year-To-Date Per Election for Office Sought		609554.15	Disbursem 2014	1	Primary	X General
(a) SUBTOTAL of Itemized Independent Exp	enditures				7	131691.00
(b) SUBTOTAL of Unitemized Independent E	xpenditures		·· •			
(c) TOTAL Independent Expenditures			· •		1 1 7	
Under penalty of perjury I certify that the inc with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorize					

[Electronically Filed]

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Date

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David Donnelly

Signature

	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES			PAGE 18	OF 27
N	AME OF COMMITTEE (In Full)		EEC		4 OF FORM 3X ON NUMBER ▼
E	Every Voice Action		C	C00566208	W NOMBER V
CI	heck if 24-hour report 48-hour report New report Amends report		M = M	/ D D /	Y W Y W Y
	Full Name of Payee Mission Control, Inc.		of Publ	lic Distribution/	Dissemination
	Mailing Address 114 Mansfield Hollow Rd	- L	10	02	2014
	# A	Amo	unt		
	City State Zip Code				17531.32
	Mansfield Center CT 06250-1316			D: VN7BA9W	
	Purpose of Expenditure Mail Category/ Type 004	- 1 -	10	02	2014
	Name of Federal Candidate Support C	Office Soug	ht:	X House	District: 26
	Carlos Curbelo Oppose	Presid	lent	Senate	State: FL
	Odiolidai lodi lo Bato	oisburseme 014		Primary pecify)	X General
	Murphy Vogel Askew Reilly LLC Mailing Address 1199 N Fairfax St Ste 220	Amo	10 unt	02	2014
	City State Zip Code	$\dashv \sqcap$			8126.12
	Alexandria VA 22314-1437			ID: VN7BA9W oursement or C	
	Purpose of Expenditure Advertising Category/ Type 004] [10	03	2014
	Name of Federal Candidate Support C	Office Soug	ht:	House	District:
	Mike Rounds	Presid		X Senate	State: SD
	Calcillati Ical Io Date	Disburseme 2014		Primary specify) ▶	X General
	(a) SUBTOTAL of Itemized Independent Expenditures		-7	1 1 1	25657.44
	(b) SUBTOTAL of Unitemized Independent Expenditures	- [
	(c) TOTAL Independent Expenditures	· [7	
	Under penalty of perjury I certify that the independent expenditures reported herein were no with, or at the request or suggestion of, any candidate or authorized committee or agent of e party committee) any political party committee or its agent.				

[Electronically Filed]

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Date

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TE	EMIZED INDEPENDENT EXPEND	DITURES			PAGE 19 OF 27 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)			FE	EC IDENTIFICATION NUMBER ▼
	Every Voice Action				C00566208
Ch	heck if 24-hour report 48-hour	report New repo	ort Amends repo	ort filed on	M / D = D / Y = Y = Y
	Full Name of Payee			Date of 1	Public Distribution/Dissemination
	Mission Control, Inc.			M 10	
	Mailing Address 114 Mansfield Hollow F	₹d		Amount	
	City	State	Zip Code		22122.74
	Mansfield Center	СТ	06250-1316		on ID: VN7BA9WAGY2 Disbursement or Obligation
	Purpose of Expenditure Direct Mail		Category/ Type 004	M 10	
	Name of Federal Candidate		Support	Office Sought:	X House District:07
	Doug Ose		Oppose	President	
	Calendar Year-To-Date Per Election for Office Sought		26901.84	Disbursement F 2014 Othe	For: Primary
	Full Name of Payee Mack Sumner Communication	ons			Public Distribution/Dissemination M / D D D / Y D Y D Y D Y D Y D Y D Y D Y
	Mailing Address 2001 N Beauregard St			Amount	
	Ste 420	State	Zip Code		12376.87
	Alexandria	VA	22311-1750		ion ID: VN7BA9WHHD4 Disbursement or Obligation
	Purpose of Expenditure Mail		Category/ Type 004	M 10	M / D D / Y Y Y
	Name of Federal Candidate		Support	Office Sought:	X House District: 24
	John Katko		X Oppose	President	Senate State: NY
	Calendar Year-To-Date Per Election for Office Sought		24753.74	Disbursement F 2014 Other	For: Primary X General er (specify) ▶
	(a) SUBTOTAL of Itemized Independent	Expenditures		>	34499.61
	(b) SUBTOTAL of Unitemized Independe	ent Expenditures		• •	7 1 7 1 7
	(c) TOTAL Independent Expenditures			· •	7
	Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	any candidate or authorized			
	David Donnelly	[Electron	ically Filed] Date	M M / D	23 2014
	Signature		_ Date	' L L	

TEMIZED INDEPENDENT EXPEND	NTURES		PAGE 20 OF 27 FOR LINE 24 OF FORM 3.
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER
Every Voice Action			C C00566208
Check if 24-hour report 48-hour	report New repo	ort Amends repo	ort filed on
Full Name of Payee Mack Sumner Communications			Date of Public Distribution/Dissemination
			10 14 2014
Mailing Address 2001 N Beauregard St Ste 420			Amount
City	State	Zip Code	13318.72
Alexandria	VA	22311-1750	Transaction ID : VN7BA9WHHT6 Date of Disbursement or Obligation
Purpose of Expenditure Mail		Category/ Type 004	M M / D D / Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 02
Marilinda Garcia		X Oppose	President Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		26637.44	Disbursement For: Primary General 2014 Other (specify) ▶
Full Name of Payee Mission Control, Inc.			Date of Public Distribution/Dissemination
Mailing Address 114 Mansfield Hollow R	td.		Amount
# A			1000000
City Mansfield Center	State CT	Zip Code 06250-1316	13036.83 Transaction ID: VN7BA9WGG93
Purpose of Expenditure Mail		Category/ Type 004	Date of Disbursement or Obligation
Name of Federal Candidate		Support	Office Sought:
NAN HAYWORTH		X Oppose	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	,	26053.66	Disbursement For: Primary General 2014 General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent	Expenditures		> 26355.55
(b) SUBTOTAL of Uniternized Independent	nt Expenditures		
(c) TOTAL Independent Expenditures			-
	any candidate or authorized		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political
David Donnelly	[Electron	ically Filed] Date	n 10 23 2014
Signature		_ Date	,

Signature

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SCHEDULE E (FEC Form 3X)	
TEMIZED INDEPENDENT EXPENDITURES	PAGE 21 OF 27 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Every Voice Action	C C00566208
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee Date Mission Control, Inc.	of Public Distribution/Dissemination
	10 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 114 Mansfield Hollow Rd Amou	unt
# A City State Zip Code	2389.55
Mansfield Center CT 06250-1316 Transa	action ID : VN7BA9WGGA1 of Disbursement or Obligation
Purpose of Expenditure	10 10 2014
Name of Federal Candidate Support Office Sough	ht: X House District:07
Doug Ose	dent Senate State: CA
Calendar Year-To-Date Per Election for Office Sought Disbursement 26901.84	nt For:
	of Public Distribution/Dissemination
Mission Control, Inc.	M - M / D - D / Y - Y - Y - Y - Y - Y - Y - Y - Y - Y
Mailing Address 114 Mansfield Hollow Rd Amou	unt
# A City State Zip Code	5140.84
Mansfield Center CT 06250-1316 Transa	action ID : VN7BA9WGGB8 of Disbursement or Obligation
Purpose of Expenditure	10 10 2014
Name of Federal Candidate Support Office Soug	ht: X House District: 26
Carlos Curbelo Oppose Presid	dent Senate State: FL
Calendar Year-To-Date Per Election for Office Sought Disbursement 27813.00 Disbursement 2014	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures	7530.39
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	17117117
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if party committee) any political party committee or its agent.	
David Donnelly	D D / Y Y Y

[Electronically Filed]

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Date

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TE	EMIZED INDEPENDENT EXPENDITURES					PAGE 22 OF 27 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)				FEC ID	ENTIFICATION NUMBER ▼
E	Every Voice Action				C	C00566208
Ch	heck if 24-hour report 48-hour report	New repo	ort Amends repo		/ M /	D = D / Y = Y = Y
	Full Name of Payee			Date	of Public	: Distribution/Dissemination
	Buying Time				10 /	11 / 2014
	Mailing Address 650 Massachusetts Ave NW			Amou	ınt	
	Ste 210	01-1-	7' 0-1-			44702.50
	City Washington	State DC	Zip Code 20001-3728			44703.50 : VN7BA9WFY52 rsement or Obligation
	Purpose of Expenditure Advertising		Category/ Type		10	11 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate		Support	Office Sough	nt:	House District:
	Mike Rounds		X Oppose	Preside		Senate State: SD
	Calendar Year-To-Date Per Election for Office Sought		609554.15	Disbursemen 2014	nt For: Other (sp	Primary
	Full Name of Payee Buying Time				of Public	Distribution/Dissemination
	Mailing Address 650 Massachusetts Ave NW			Amou	unt	
	Ste 210	State	Zip Code	— I I .		44703.50
	Washington	DC	20001-3728			: VN7BA9WFY60 ursement or Obligation
	Purpose of Expenditure Advertising		Category/ Type	$\Box \mid \Box$	10	11 / 2014
	Name of Federal Candidate		Support	Office Sough	ht:	House District:
	Larry Pressler		Oppose	Presid	lent >	Senate State: SD
	Calendar Year-To-Date Per Election for Office Sought	7 7	609554.15	Disbursemer 2014	nt For: Other (sp	Primary ☐ General ecify) ►
	(a) SUBTOTAL of Itemized Independent Expenditure	es		· [89407.00
	(b) SUBTOTAL of Unitemized Independent Expenditu	tures		· •		7
	(c) TOTAL Independent Expenditures			· •		
	Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized				
	David Donnelly	[Electron	ically Filed] Date	M M /	23	2014
	Signature		_			

Signature

	CHEDULE E (FEC Form 3 EMIZED INDEPENDENT EXPENI					PAGE 23 FOR LINE 24	OF 27 FORM 3X
	AME OF COMMITTEE (In Full)				FEC	IDENTIFICATIO	N NUMBER ▼
E	Every Voice Action				C	C00566208	
С	heck if 24-hour report 48-hour	report New rep	ort Amends repo	ort filed on	М = М	/ D D /	Y Y Y
	Full Name of Payee Murphy Vogel Askew Reilly LLC	 D			M = M	olic Distribution/D	Y Y Y Y Y Y
	Mailing Address 1199 N Fairfax St			Amo	10 unt	11	2014
	Ste 220				_		
	City	State	Zip Code				1000.00
	Alexandria	VA	22314-1437			ÍD: VN7BA9WN bursement or Ol	
	Purpose of Expenditure Advertising Production		Category/ Type 004		10 10	13	2014
	Name of Federal Candidate		Support	Office Soug	ht:	House D	District:
	Mike Rounds		X Oppose	Presid		X Senate	State: SD
	Calendar Year-To-Date Per Election for Office Sought		609554.15	Disburseme 2014		Primary specify) ▶	X General
	Full Name of Payee			Date	of Pub	olic Distribution/[Dissemination
	Murphy Vogel Askew Reilly	LLC			M = M	/ D D /	2014
	Mailing Address 1199 N Fairfax St			Amo	unt		
	Ste 220						
	City	State	Zip Code				7601.12
	Alexandria	VA	22314-1437			ÍD: VN7BA9WN bursement or O	
	Purpose of Expenditure Advertising Production		Category/ Type 004		10	13	2014
	Name of Federal Candidate		Support	Office Soug	aht:	House [District:
	Mike Rounds		Oppose	Presid		X Senate	State: SD
	Calendar Year-To-Date Per Election for Office Sought		609554.15	Disburseme		Primary specify) ▶	X General
	(a) SUBTOTAL of Itemized Independent	Evponditures			Outlot (opeony) ·	8601.12
	(a) SOBTOTAL OF REINIZED INDEPENDENT	Experialtures		• 🗀		F -7F	8001.12
	(b) SUBTOTAL of Unitemized Independent	ent Expenditures		• •		, , , , , , , , , , , , , , , , , , ,	
	(c) TOTAL Independent Expenditures			•		7	
	Under penalty of perjury I certify that the with, or at the request or suggestion of, party committee) any political party committee	any candidate or authorized					
	David Donnelly			M M /	D =	D / Y Y	Y

[Electronically Filed]

2014

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Date

TEMIZED INDEPENDENT EXPEND	ITURES			PAGE 24 OF 27 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Every Voice Action				C C00566208
Check if 24-hour report 48-hour r	report New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee			Date	of Public Distribution/Dissemination
Mack Sumner Communications				10 15 2014
Mailing Address 2001 N Beauregard St				
Ste 420			Amou	ınt
City	State	Zip Code		12376.87
Alexandria	VA	22311-1750		action ID : VN7BA9WPTP5 of Disbursement or Obligation
Purpose of Expenditure Mail		Category/ Type 004		10 / 14 / 2014
Name of Federal Candidate		Support	Office Sough	ht: X House District: 24
John Katko		Support Oppose	Presid	NV
Calendar Year-To-Date		/\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Disbursemer	Seriale State.
Per Election for Office Sought		24753.74	2014	Other (specify)
Full Name of Payee				of Public Distribution/Dissemination
Mack Sumner Communicatio	ns			10 15 2014
Mailing Address 2001 N Beauregard St			L	
Ste 420			Amou	unt
City	State	Zip Code		13318.72
Alexandria	VA	22311-1750		action ID : VN7BA9WPTT7 of Disbursement or Obligation
Purpose of Expenditure Mail		Category/ Type 004		10 / 14 / 2014
Name of Federal Candidate		Support	Office Sough	ht: X House District: 02
Marilinda Garcia		Oppose	Presid	N⊔
Calendar Year-To-Date		20007.44	Disbursemer	nt For: Primary X General
Per Election for Office Sought	, , , , ,	26637.44	2014	Other (specify) -
(a) SUBTOTAL of Itemized Independent E	Expenditures		· [25695.59
(b) SUBTOTAL of Unitemized Independen	it Expenditures			
(c) TOTAL Independent Expenditures			• [
Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party commit	ny candidate or authorized			
David Donnelly	[Electron	ically Filed] Date	M M /	23 2014
Signature		_ Date		

David Donnelly

Signature

	CHEDULE E (FEC Form 3X)				
T	EMIZED INDEPENDENT EXPENDITUR	RES			PAGE 25 OF 27 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)			FE	C IDENTIFICATION NUMBER ▼
E	Every Voice Action			C	C00566208
Cl	heck if 24-hour report 48-hour report	New rep	port Amends repo	ort filed on	M / D = D / Y = Y = Y
	Full Name of Payee Mission Control, Inc.				Public Distribution/Dissemination
	Mailing Address			10	
	114 Mansfield Hollow Rd # A			Amount	
	City	State	Zip Code		13016.83
	Mansfield Center	СТ	06250-1316		on ID: VN7BA9WPR57 Disbursement or Obligation
	Purpose of Expenditure Mail		Category/ Type 004	10	
	Name of Federal Candidate		Support	Office Sought:	House District: 18
	NAN HAYWORTH		X Oppose	President	Senate State: NY
	Calendar Year-To-Date Per Election for Office Sought	.,,	26053.66	Disbursement For 2014 Othe	or:
	Full Name of Payee				Public Distribution/Dissemination
	Mission Control, Inc.			10	
	Mailing Address 114 Mansfield Hollow Rd			Amount	
	# A	State	Zip Code		2389.55
	Mansfield Center	СТ	06250-1316		on ID: VN7BA9WPR73 Disbursement or Obligation
	Purpose of Expenditure Mail		Category/ Type 004	M 10	M / D D / Y Y Y Y
	Name of Federal Candidate		Support	Office Sought:	House District: 07
	Doug Ose		Support Oppose	President	Trouse District.
	Calendar Year-To-Date Per Election for Office Sought		26901.84	Disbursement F 2014 Othe	for: Primary
	(a) SUBTOTAL of Itemized Independent Expen	ditures		·	15406.38
	(b) SUBTOTAL of Unitemized Independent Exp	penditures		· •	7 7
	(c) TOTAL Independent Expenditures			>	7 1 1 7 1 1 7 1
	Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any ca party committee) any political party committee of	ndidate or authorize			

[Electronically Filed]

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Date

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ΤE	MIZED INDEPENDENT EXPENDITURES			PAGE 26 OF 27 FOR LINE 24 OF FORM 3X			
	ME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼					
E۱	very Voice Action	C C00566208					
Check if 24-hour report 48-hour report New report Amends report filed on							
T	Full Name of Payee Mission Control, Inc.		Da	te of Public Distribution/Dissemination			
-				10 15 / Y Y Y Y Y			
	Mailing Address 114 Mansfield Hollow Rd		Am	nount			
ŀ	# A City State	Zip Code	-	5140.84			
	Mansfield Center CT	06250-1316		nsaction ID : VN7BA9WPR81			
ŀ	Purpose of Expenditure Mail	Category/ Type 004	Da	te of Disbursement or Obligation			
ŀ	Name of Federal Candidate	Support	Office Sou	ught: X House District: 26			
	Carlos Curbelo	Oppose		sident Senate State: FL			
	Calendar Year-To-Date Per Election for Office Sought	27813.00	Disbursem 2014	nent For:			
Ī	Full Name of Payee		Da	ate of Public Distribution/Dissemination			
	Buying Time			10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	Mailing Address 650 Massachusetts Ave NW		Am	nount			
1	Ste 210			140457.50			
	City State Washington DC	Zip Code 20001-3728		149457.50 nsaction ID : VN7BA9WFY85 tte of Disbursement or Obligation			
	Purpose of Expenditure Advertising	Category/ Type		10 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
ľ	Name of Federal Candidate	Support	Office So	ught: House District:			
	Larry Pressler	X Oppose	Pre	sident Senate State: SD			
	Calendar Year-To-Date Per Election for Office Sought	609554.15	Disbursen 2014	nent For:			
((a) SUBTOTAL of Itemized Independent Expenditures		• [154598.34			
(b) SUBTOTAL of Unitemized Independent Expenditures							
((c) TOTAL Independent Expenditures		·· • [
٧	Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
	David Donnelly [Electroni	ically Filed] Date	M M M	23 2014			
	Signature	_ Buto					

Signature

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	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES		PAGE 27 OF 27
			FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full) Every Voice Action		FEC IDENTIFICATION NUMBER ▼
	every voice Action		C C00566208
Ch	neck if 24-hour report 48-hour report New report Amend	ls report filed	on Mam / Dad / Yayayay
	Full Name of Payee Every Voice		Date of Public Distribution/Dissemination
	Mailing Address		10 15 2014
	1133 19th St NW		Amount
	City State Zip Code		1000.00
	Washington DC 20036-3612		Transaction ID : VN7BA9WS9C2 Date of Disbursement or Obligation
	Purpose of Expenditure Social Media Advertisement Costs Category/ Type	004	10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate Supp	port Office	Sought: House District:
	Larry Pressler		President Senate State: SD
	Calendar Year-To-Date Per Election for Office Sought 609554.15	Disbu 2014	rsement For: Primary X General Other (specify) ▶
	Full Name of Payee Murphy Vogel Askew Reilly LLC		Date of Public Distribution/Dissemination
	Mailing Address 1199 N Fairfax St Ste 220		Amount
	City State Zip Code		9880.41
	Alexandria VA 22314-1437		Transaction ID : VN7BA9WS3Z8 Date of Disbursement or Obligation
	Purpose of Expenditure Advertising Production Category/ Type	004	10 15 2014
	Name of Federal Candidate Supp	port Office	Sought: House District:
	Larry Pressler		President Senate State: SD
	Calendar Year-To-Date Per Election for Office Sought 609554.15	Disbu 2014	rsement For: Primary
	(a) SUBTOTAL of Itemized Independent Expenditures	······	10880.41
	(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
	(c) TOTAL Independent Expenditures	······ >	530322.83
	Under penalty of perjury I certify that the independent expenditures reported herein with, or at the request or suggestion of, any candidate or authorized committee or a party committee) any political party committee or its agent.		
	David Donnelly	М	M / D D / Y Y Y Y

[Electronically Filed]

2014

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Date