

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation America, Inc.		3. FEC Identification Number <div>C C90014788</div>
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1900 Campus Commons Dr Suite 600		
(c) City, State and ZIP Code Reston VA 20191		
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report ☒ 24-Hour Report

☐ October 15 Quarterly Report ☐ 48-Hour Report

☐ January 31 Year-End Report

b) Is this Report an amendment? ☒ No ☐ Yes, it amends the report filed on / /

5. COVERING PERIOD:

FROM / /

THROUGH / /

6. TOTAL CONTRIBUTIONS..... 0.00

7. TOTAL INDEPENDENT EXPENDITURES 20000.00

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 any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE _____

[Electronically Filed]

David A. Bozell

David A. Bozell

06/04/2014

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

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: F5N
Transaction ID :

Please note that the independent expenditures disclosed on this report were paid from general treasury funds and no contributions were made for the purpose of furthering these expenditures.

Form/Schedule:
Transaction ID:

SCHEDULE 5-E **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 3 OF 3
 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

America, Inc.

Full Name (Last, First, Middle Initial) of Payee
 Creative Response Concepts

Mailing Address 2760 Eisenhower Ave
 4th Floor

City State Zip Code
 Alexandria VA 22314

Date of Public Distribution/Dissemination

06 / 03 / 2014

Amount

20000.00

Transaction ID : F57.4121

Purpose of Expenditure
 Online/Digital Ads & Production

Category/
 Type 004

Office Sought: ☐ House State: MS
☒ Senate District: 00
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
 THAD COCHRAN

Check One: ☐ Support ☒ Oppose

Calendar Year-To-Date Per Election
 for Office Sought 120000.00

Disbursement For: ☒ Primary ☐ General
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Mailing Address

City State Zip Code

Date of Public Distribution/Dissemination

/ /

Amount

Purpose of Expenditure

Category/
 Type

Office Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ Oppose

Calendar Year-To-Date Per Election
 for Office Sought

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Mailing Address

City State Zip Code

Date of Public Distribution/Dissemination

/ /

Amount

Purpose of Expenditure

Category/
 Type

Office Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ Oppose

Calendar Year-To-Date Per Election
 for Office Sought

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures.....▶ 20000.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures▶

(c) **TOTAL** Independent Expenditures.....▶ 20000.00
 (carry total from last page forward to Line 7)