

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Zachary R McCleese
Mailing Address 323 Rolling Pines Dr
City Spring Lake State NC Zip Code 28390
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 60.00
Transaction ID : c7dca952-2552-468c-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Zachary R McCleese
Mailing Address 323 Rolling Pines Dr
City Spring Lake State NC Zip Code 28390
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 24.30
Transaction ID : 129781fd-6d50-47d7-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 84.30
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
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Full Name of Payee Sue G Walker
Mailing Address 3 Girard
City Fort Smith State AR Zip Code 72901
Purpose of Expenditure Salary Category/Type 001
Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 40.00
Transaction ID : dbd2c2ed-4294-4d35-9
Date of Disbursement or Obligation 11 / 02 / 2014
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Calendar Year-To-Date Per Election for Office Sought 277575.33
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Camille N Yearry
Mailing Address 2025 NE 67th St
City Gladstone State MO Zip Code 64118
Purpose of Expenditure Salary Category/Type 001
Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 50.00
Transaction ID : eff58576-21cb-43ee-a
Date of Disbursement or Obligation 11 / 02 / 2014
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Calendar Year-To-Date Per Election for Office Sought 277575.33
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 90.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Full Name of Payee Camille N Yearry
Mailing Address 2025 NE 67th St
City Gladstone State MO Zip Code 64118
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 18.18
Transaction ID : b7df43ec-786d-4b97-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Kristina M Jinkens
Mailing Address 2138 N 1000 Rd
City Eudora State KS Zip Code 66025
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 20.00
Transaction ID : 93221f1c-fcec-4541-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 38.18
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Full Name of Payee Lisa Booth
Mailing Address 1434 South Avenue
City Eden State NC Zip Code 27288
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 100.00
Transaction ID : 49575430-5ca3-41f2-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Lisa Booth
Mailing Address 1434 South Avenue
City Eden State NC Zip Code 27288
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 15.60
Transaction ID : 2114b2f5-9622-42e3-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 115.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
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FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Alice K Salazar
Mailing Address 605 W Houston St
City Marshall State TX Zip Code 75633
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 80.00
Transaction ID : 4ce9fd74-ea63-428c-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Alice K Salazar
Mailing Address 605 W Houston St
City Marshall State TX Zip Code 75633
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 48.90
Transaction ID : 43b6be6d-b528-4df2-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 128.90
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Full Name of Payee Paulette M Carrieri
Mailing Address 4805 TuPenny Lane
City Raleigh State NC Zip Code 27606
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 30.00
Transaction ID : 164e9598-8836-4088-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Paulette M Carrieri
Mailing Address 4805 TuPenny Lane
City Raleigh State NC Zip Code 27606
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 6.00
Transaction ID : 82bd8c1c-d78d-4ddb-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 36.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Logan B Piper
Mailing Address 3205 Pebble Beach Rd
City Conway State AR Zip Code 72034
Purpose of Expenditure Salary Category/Type 001
Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 69.00
Transaction ID : 2173e0c3-fd50-4d9c-b
Date of Disbursement or Obligation 11 / 02 / 2014
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Calendar Year-To-Date Per Election for Office Sought 277575.33
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Logan B Piper
Mailing Address 3205 Pebble Beach Rd
City Conway State AR Zip Code 72034
Purpose of Expenditure Mileage Category/Type 002
Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 26.49
Transaction ID : 74eababd-3363-492e-a
Date of Disbursement or Obligation 11 / 02 / 2014
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Calendar Year-To-Date Per Election for Office Sought 277575.33
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 95.49
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Carol L Walters
Mailing Address 1900 Glen West Way
City Fort Smith State AR Zip Code 72916
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 50.00
Transaction ID : 6437f542-4353-4293-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Carol L Walters
Mailing Address 1900 Glen West Way
City Fort Smith State AR Zip Code 72916
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 23.10
Transaction ID : 8f2c8b63-6b79-4aa4-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 73.10
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.

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Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Bailey R Blair
Mailing Address 402A N 10th St
City Manhattan State KS Zip Code 66502
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 25.00
Transaction ID : 8ed4e4bf-ac8e-430a-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Caelan J Blair
Mailing Address 510 Haymaker Hall
City Manhattan State KS Zip Code 66506
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 45.00
Transaction ID : b49cca6c-8b2a-493d-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 70.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

70.00
[]
[]

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FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Reagan Waites
Mailing Address 9805 St Stephens Ct
City Raleigh State NC Zip Code 27615
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 30.00
Transaction ID : 7d57f4b6-585e-4f77-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Reagan Waites
Mailing Address 9805 St Stephens Ct
City Raleigh State NC Zip Code 27615
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 3.60
Transaction ID : 55ccc9b0-2cb6-44a6-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 33.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Full Name of Payee Jonathan M Harris
Mailing Address 3654 Tara St
City Springdale State AR Zip Code 72762
Purpose of Expenditure Salary Category/Type 001
Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 60.00
Transaction ID : b453d380-daaf-4ee0-9
Date of Disbursement or Obligation 11 / 02 / 2014
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Calendar Year-To-Date Per Election for Office Sought 277575.33
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Jonathan M Harris
Mailing Address 3654 Tara St
City Springdale State AR Zip Code 72762
Purpose of Expenditure Mileage Category/Type 002
Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 5.10
Transaction ID : e56dff3b-836f-433e-b
Date of Disbursement or Obligation 11 / 02 / 2014
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Calendar Year-To-Date Per Election for Office Sought 277575.33
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 65.10
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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FEC IDENTIFICATION NUMBER C C00530766
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Full Name of Payee Edmond D Rea
Mailing Address 416 Vine Dr
City Lawrence State KS Zip Code 66049
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 45.00
Transaction ID : f0195a8d-5fe7-47f7-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Edmond D Rea
Mailing Address 416 Vine Dr
City Lawrence State KS Zip Code 66049
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 9.30
Transaction ID : ed088b82-f417-4567-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 54.30
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Lorri Anderson
Mailing Address 7214 Duchamp Dr
City Charlotte State NC Zip Code 23215
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 50.00
Transaction ID : 9c775769-d5dc-4371-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Lorri Anderson
Mailing Address 7214 Duchamp Dr
City Charlotte State NC Zip Code 23215
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 4.80
Transaction ID : 43a3e8c6-3fd0-415d-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 54.80
(b) SUBTOTAL of Unitemized Independent Expenditures
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NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Gary W Fuhrmann
Mailing Address 9425 Jessica Drive
City Shreveport State LA Zip Code 71106
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 67.50
Transaction ID : b7e74bec-1f0a-4288-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Gary W Fuhrmann
Mailing Address 9425 Jessica Drive
City Shreveport State LA Zip Code 71106
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 8.70
Transaction ID : 5290f78f-320a-4814-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 76.20
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee: Kyler A Jost
Mailing Address: 1830 College Height Rd
City: Manhattan State: KS Zip Code: 66502
Purpose of Expenditure: Salary Category/Type: 001
Name of Federal Candidate: Mr. Greg Orman [X] Oppose
Calendar Year-To-Date Per Election for Office Sought: 246310.99

Date of Public Distribution/Dissemination: 11 / 02 / 2014
Amount: 45.00
Transaction ID: bd4cfa93-92dc-41e7-b
Date of Disbursement or Obligation: 11 / 02 / 2014
Office Sought: [] House District: 00 [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee: Kyler A Jost
Mailing Address: 1830 College Height Rd
City: Manhattan State: KS Zip Code: 66502
Purpose of Expenditure: Mileage Category/Type: 002
Name of Federal Candidate: Mr. Greg Orman [X] Oppose
Calendar Year-To-Date Per Election for Office Sought: 246310.99

Date of Public Distribution/Dissemination: 11 / 02 / 2014
Amount: 22.50
Transaction ID: daa809c7-95c0-47a5-9
Date of Disbursement or Obligation: 11 / 02 / 2014
Office Sought: [] House District: 00 [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures: 67.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date: 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Joseph R Rys
Mailing Address 160 #50 Pompano Dr
City New Bern State NC Zip Code 28560
Purpose of Expenditure Salary Category/Type 001
Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 55.00
Transaction ID : 84579220-1854-46ac-a
Date of Disbursement or Obligation 11 / 02 / 2014
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 1087975.24
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Joseph R Rys
Mailing Address 160 #50 Pompano Dr
City New Bern State NC Zip Code 28560
Purpose of Expenditure Mileage Category/Type 002
Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 12.00
Transaction ID : 888bad0b-7463-4736-9
Date of Disbursement or Obligation 11 / 02 / 2014
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 1087975.24
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 67.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Kelly Dolan
Mailing Address 543 S 2nd St
City Bellaire State NC Zip Code 77401
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 60.00
Transaction ID : 63fb7686-8dab-4432-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Kelly Dolan
Mailing Address 543 S 2nd St
City Bellaire State NC Zip Code 77401
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 3.90
Transaction ID : 68c65715-6e7c-4b2f-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 63.90
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Rhonda Moback
Mailing Address 2704 E Glen Oaks Dr
City Wichita State KS Zip Code 67216
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 32.50
Transaction ID : a59962d0-18b1-4779-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Barbara A Williams
Mailing Address 3002 Darden Rd Apt A
City Greensboro State NC Zip Code 27407
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 33.00
Transaction ID : 1ed01ff7-57ce-4e13-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 65.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Jon Linch
Mailing Address 6108 Harkins Ave
City Little Rock State AR Zip Code 72210
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 100.00
Transaction ID : f292a906-3b5a-4f74-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Jon Linch
Mailing Address 6108 Harkins Ave
City Little Rock State AR Zip Code 72210
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 40.20
Transaction ID : 29eac314-0f9b-40cd-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 140.20
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.

Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Alexa S Dudley
Mailing Address 4367 Splitlog Rd
City Goodman State MO Zip Code 64843
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 100.00
Transaction ID : 48610108-ca15-4d93-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Alexa S Dudley
Mailing Address 4367 Splitlog Rd
City Goodman State MO Zip Code 64843
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 36.00
Transaction ID : 9b8993f7-2a70-4e0e-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 136.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Tristan Hightower
Mailing Address 2490 W Cornerstone PI
City Fayetteville State AR Zip Code 72703
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 20.00
Transaction ID : 040e8702-a288-49cb-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Tristan Hightower
Mailing Address 2490 W Cornerstone PI
City Fayetteville State AR Zip Code 72703
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 4.50
Transaction ID : da2b59fb-4051-4399-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 24.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Elvis Spears
Mailing Address 2150 Hope St
City New Orleans State LA Zip Code 70119
Purpose of Expenditure Salary Category/Type 001
Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 80.00
Transaction ID : d7d1d54a-63d4-4204-8
Date of Disbursement or Obligation 11 / 02 / 2014
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 230656.44
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Elvis Spears
Mailing Address 2150 Hope St
City New Orleans State LA Zip Code 70119
Purpose of Expenditure Mileage Category/Type 002
Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 11.10
Transaction ID : 50ee3b92-ff08-4b8c-b
Date of Disbursement or Obligation 11 / 02 / 2014
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 230656.44
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 91.10
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

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.

Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Kevin L Battle
Mailing Address 3300 Asher Ave
City Little Rock State AR Zip Code 72204
Purpose of Expenditure Salary Category/Type 001
Date of Public Distribution/Dissemination 11/02/2014
Amount 90.00
Transaction ID : e1de76ec-691c-45ca-b
Date of Disbursement or Obligation 11/02/2014
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Calendar Year-To-Date Per Election for Office Sought 277575.33
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Kevin L Battle
Mailing Address 3300 Asher Ave
City Little Rock State AR Zip Code 72204
Purpose of Expenditure Mileage Category/Type 002
Date of Public Distribution/Dissemination 11/02/2014
Amount 73.50
Transaction ID : b63f5286-03ac-4bb1-8
Date of Disbursement or Obligation 11/02/2014
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Calendar Year-To-Date Per Election for Office Sought 277575.33
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 163.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11/04/2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Mary Catherine Toburen
Mailing Address 1222 SE 44 St
City Topeka State KS Zip Code 66609
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 35.00
Transaction ID : 363d7a9a-9435-412b-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Mary Catherine Toburen
Mailing Address 1222 SE 44 St
City Topeka State KS Zip Code 66609
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 10.50
Transaction ID : 11642a63-e266-409b-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 45.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.

Ms. Emily Buchanan

[Electronically Filed]

Date

11 / 04 / 2014

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Francis Richardson
Mailing Address 220 Doucet Rd
City Lafayette State LA Zip Code 70503
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 15.00
Transaction ID : 71f1d125-0406-43b2-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Francis Richardson
Mailing Address 220 Doucet Rd
City Lafayette State LA Zip Code 70503
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 1.29
Transaction ID : 7ec4e98d-c739-423e-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 16.29
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Amy J McMillion
Mailing Address 1325 S Collegiate Dr Apt 202G
City Wilkesboro State NC Zip Code 28697
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 18.30
Transaction ID : dd47a288-3aa8-459f-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Amy J McMillion
Mailing Address 1325 S Collegiate Dr Apt 202G
City Wilkesboro State NC Zip Code 28697
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 3.00
Transaction ID : 0213d032-5cfa-4fab-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 21.30
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Irene R Hoyer
Mailing Address 4310 N Mission Rd
City Bel Aire State KS Zip Code 67226
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 43.00
Transaction ID : f41a58f1-112b-4c7b-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Irene R Hoyer
Mailing Address 4310 N Mission Rd
City Bel Aire State KS Zip Code 67226
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 16.44
Transaction ID : 9895650e-052f-4305-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 59.44
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Kinsey E Beck
Mailing Address 103 Glenhaven Ct
City Harvest State AL Zip Code 35749
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 60.00
Transaction ID : e12dd7c7-3035-4514-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Kinsey E Beck
Mailing Address 103 Glenhaven Ct
City Harvest State AL Zip Code 35749
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 26.10
Transaction ID : cb9cbfb0-0114-48d5-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 86.10
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Heather N Montgomery
Mailing Address 106 Wyncrest Ct
City Hendersonville State TN Zip Code 37075
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 50.00
Transaction ID : 669d754f-4dc8-422b-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Heather N Montgomery
Mailing Address 106 Wyncrest Ct
City Hendersonville State TN Zip Code 37075
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 18.60
Transaction ID : 7384daa2-536d-4bb1-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 68.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Colton R Overcash
Mailing Address 121 Ohara Dr
City Salisbury State NC Zip Code 28147
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 95.00
Transaction ID : 4d3d42e0-5ac2-4a35-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Colton R Overcash
Mailing Address 121 Ohara Dr
City Salisbury State NC Zip Code 28147
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 155.70
Transaction ID : 7134b271-8e74-422b-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 250.70
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Andrew Sricklin
Mailing Address 2026 West Nettleton Avenue Apt 2
City Jonesboro State AR Zip Code 72401
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 20.00
Transaction ID : a0480943-1a2f-4cb0-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Andrew Sricklin
Mailing Address 2026 West Nettleton Avenue Apt 2
City Jonesboro State AR Zip Code 72401
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 46.26
Transaction ID : f1e8684c-543c-499d-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 66.26
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Felicia A Jones
Mailing Address 4106 Martha St
City Shreveport State LA Zip Code 71109
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 80.00
Transaction ID : 7daec74f-a543-4583-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Felicia A Jones
Mailing Address 4106 Martha St
City Shreveport State LA Zip Code 71109
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 9.90
Transaction ID : e8397e08-7588-4bdd-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 89.90
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Kolbe J Peloquin
Mailing Address 623 Union Park Circle
City Colwich State KS Zip Code 67030
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 35.00
Transaction ID : cfe0ab9a-c2d7-43fc-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Kolbe J Peloquin
Mailing Address 623 Union Park Circle
City Colwich State KS Zip Code 67030
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 18.00
Transaction ID : 4f6d874b-1a85-4037-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 53.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Patricia F Arnold
Mailing Address 1117 Clipper Dr
City Slidell State LA Zip Code 70458
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 28.00
Transaction ID : b53b8ebb-3037-43d4-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Patricia F Arnold
Mailing Address 1117 Clipper Dr
City Slidell State LA Zip Code 70458
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 3.60
Transaction ID : a8d09411-3c34-4a77-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 31.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Gloria L Moyer
Mailing Address 1505 Dills Creek Lane
City Morehead State NC Zip Code 28557
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 15.00
Transaction ID : 07af2284-d561-4d11-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Gloria L Moyer
Mailing Address 1505 Dills Creek Lane
City Morehead State NC Zip Code 28557
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 2.70
Transaction ID : 2cc7ae32-1865-442f-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 17.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Joshua D Syrotchen
Mailing Address 915 East Market Ave
City Searcy State AR Zip Code 72149
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 80.00
Transaction ID : 0b028648-300b-4611-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Joshua D Syrotchen
Mailing Address 915 East Market Ave
City Searcy State AR Zip Code 72149
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 74.10
Transaction ID : d408d3d0-832f-435b-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 154.10
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Brogan A Benoit
Mailing Address 7144 South River Rd
City Addis State LA Zip Code 70710
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 120.00
Transaction ID : 21920868-a9e0-44d8-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Brogan A Benoit
Mailing Address 7144 South River Rd
City Addis State LA Zip Code 70710
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 27.60
Transaction ID : 4ef1eb4c-1367-4856-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 147.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Timothy Foley
Mailing Address 20679 Glenbrook Terrace
City Sterling State VA Zip Code 20165
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 20.00
Transaction ID : d156b3f5-d063-4d61-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Robert B Johnson
Mailing Address 804 Worthington Way
City Wilmington State NC Zip Code 28411
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 40.00
Transaction ID : d2d3c488-3501-45ef-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 60.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Lisa A Hackett
Mailing Address 137 S Palm ST
City Winnabow State NC Zip Code 28479
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 20.00
Transaction ID : 0b8572fd-ca74-45c2-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Lisa A Hackett
Mailing Address 137 S Palm ST
City Winnabow State NC Zip Code 28479
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 1.29
Transaction ID : 18f6da27-d2c3-4dac-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 21.29
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee John MacDonald
Mailing Address 1926 Edgewater Dr
City Charolette State NC Zip Code 28210
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 37.50
Transaction ID : 3973cd17-6963-4f87-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee John MacDonald
Mailing Address 1926 Edgewater Dr
City Charolette State NC Zip Code 28210
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 11.40
Transaction ID : 517f460e-7bd1-45b9-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 48.90
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Jackson S Tuttle
Mailing Address 404 Chancery Park Ct
City Kernersville State NC Zip Code 27284
Purpose of Expenditure Salary Category/Type 001
Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 45.00
Transaction ID : c51f5511-8779-45dc-8
Date of Disbursement or Obligation 11 / 02 / 2014
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 1087975.24
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Jackson S Tuttle
Mailing Address 404 Chancery Park Ct
City Kernersville State NC Zip Code 27284
Purpose of Expenditure Mileage Category/Type 002
Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 6.00
Transaction ID : 57fec856-9f6f-409b-9
Date of Disbursement or Obligation 11 / 02 / 2014
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 1087975.24
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 51.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Joneisha Stewart
Mailing Address 2329 Runnymede Dr
City Marrero State LA Zip Code 70072
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 40.00
Transaction ID : d1985d15-5cfc-4928-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Joneisha Stewart
Mailing Address 2329 Runnymede Dr
City Marrero State LA Zip Code 70072
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 7.20
Transaction ID : 85290e17-de9b-47e7-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 47.20
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Christopher L Gilbert
Mailing Address 55 Lovell Johnson Rd
City Picayune State MS Zip Code 39466
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 82.50
Transaction ID : baed24a1-1591-4581-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Christopher L Gilbert
Mailing Address 55 Lovell Johnson Rd
City Picayune State MS Zip Code 39466
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 41.40
Transaction ID : c5fcf1ea-c6e2-45c9-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 123.90
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Maria A Britt
Mailing Address 4894 Thunder Bolt
City Concord State NC Zip Code 28205
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 90.00
Transaction ID : d8ece8c3-7aa8-4127-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Christopher Marquess
Mailing Address 110 W Pecan St
City Ville Platte State LA Zip Code 70586
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 50.00
Transaction ID : 400830e9-a0cd-4bcf-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 140.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Christopher Marquess
Mailing Address 110 W Pecan St
City Ville Platte State LA Zip Code 70586
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 36.00
Transaction ID : b1d3c701-69c8-465a-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Stuart T Haley
Mailing Address 600 W Vine Ave
City Searcy State AR Zip Code 72143
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 91.50
Transaction ID : 83bf352b-0333-4cfb-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 127.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Stuart T Haley
Mailing Address 600 W Vine Ave
City Searcy State AR Zip Code 72143
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 30.00
Transaction ID : 4c8026bb-71a9-41b8-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee LaVonna A Brown
Mailing Address 1211 Treaty Rd
City Delphos State KS Zip Code 67436
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 45.00
Transaction ID : 798a10d4-81d0-422d-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 75.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee LaVonna A Brown
Mailing Address 1211 Treaty Rd
City Delphos State KS Zip Code 67436
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 23.40
Transaction ID : 3b6ffa2c-81d5-429b-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Julia Perry
Mailing Address 2046 Perrin St Apt C
City Shreveport State LA Zip Code 71101
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 80.00
Transaction ID : 17b7adf1-7c93-4a77-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 103.40
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Dylan J Sparks
Mailing Address 915 East Market Ave
City Searcy State AR Zip Code 72149
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 80.00
Transaction ID : cf14639e-b994-4860-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Dylan J Sparks
Mailing Address 915 East Market Ave
City Searcy State AR Zip Code 72149
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 59.40
Transaction ID : a75e69b3-6754-4379-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 139.40
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.

Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Jacob W Joosten
Mailing Address 1906 S Pine Apt B
City Pittsburg State KS Zip Code 66762
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 50.00
Transaction ID : fa286f81-1abd-4bd3-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Jacob W Joosten
Mailing Address 1906 S Pine Apt B
City Pittsburg State KS Zip Code 66762
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 49.68
Transaction ID : e4f32b40-3bae-4b9e-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 99.68
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.

Ms. Emily Buchanan
Signature

[Electronically Filed]

Date 11 / 04 / 2014

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Leslie D Moore
Mailing Address 1903 Swan Dr
City Lenoir State NC Zip Code 28645
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 100.00
Transaction ID : 8d2555ac-f296-40cd-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Leslie D Moore
Mailing Address 1903 Swan Dr
City Lenoir State NC Zip Code 28645
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 5.70
Transaction ID : c9f7a90f-8c67-4c43-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 105.70
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Leslie D Moore
Mailing Address 1903 Swan Dr
City Lenoir State NC Zip Code 28645
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 100.00
Transaction ID : 7bc40480-03b0-4b67-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Leslie D Moore
Mailing Address 1903 Swan Dr
City Lenoir State NC Zip Code 28645
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 5.70
Transaction ID : 9440cb20-4861-4b9c-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 105.70
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Andy Ramos
Mailing Address 907 West Trail
City Dodge City State KS Zip Code 67801
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 70.00
Transaction ID : dcf50688-5a37-481b-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Andy Ramos
Mailing Address 907 West Trail
City Dodge City State KS Zip Code 67801
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 3.75
Transaction ID : 7c9135b6-3eb8-49ac-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 73.75
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Carmen Maddrey
Mailing Address 2043 Nottingham Ln
City Burlington State NC Zip Code 27215
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 20.00
Transaction ID : 518ee377-6095-411b-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Carmen Maddrey
Mailing Address 2043 Nottingham Ln
City Burlington State NC Zip Code 27215
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 1.20
Transaction ID : dec243cc-1187-411f-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 21.20
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.

Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Victor M Valdez
Mailing Address 1702 Central Ave
City Dodge City State KS Zip Code 67801
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 70.00
Transaction ID : 49da260c-7780-4ea4-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Victor M Valdez
Mailing Address 1702 Central Ave
City Dodge City State KS Zip Code 67801
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 3.75
Transaction ID : 7390b348-1b58-4f69-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 73.75
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Jessica R Resendiz
Mailing Address 9685 Paula St
City Keithville State LA Zip Code 71047
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 105.00
Transaction ID : eb1abcae-386a-4f7b-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Jessica R Resendiz
Mailing Address 9685 Paula St
City Keithville State LA Zip Code 71047
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 59.10
Transaction ID : 6884c078-3913-45c2-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 164.10
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Jennifer F Gilbert
Mailing Address 180 McNeil Steep Hollow Rd
City Carriere State MS Zip Code 39426
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 75.00
Transaction ID : 535cfdc2-8980-413e-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Jennifer F Gilbert
Mailing Address 180 McNeil Steep Hollow Rd
City Carriere State MS Zip Code 39426
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 16.20
Transaction ID : 22356322-cd5d-4639-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 91.20
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Jeanne Tribou
Mailing Address 22369 Ponderosa Dr.
City Mandeville State LA Zip Code 70471
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 70.00
Transaction ID : a0849c38-555b-41fd-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Jeanne Tribou
Mailing Address 22369 Ponderosa Dr.
City Mandeville State LA Zip Code 70471
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 17.10
Transaction ID : 6bd6ac1f-4ea3-473b-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 87.10
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee April A Watson
Mailing Address 30217 Crook Rd
City Cleveland State MO Zip Code 64734
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 20.00
Transaction ID : bd82620e-cc78-4e4c-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee April A Watson
Mailing Address 30217 Crook Rd
City Cleveland State MO Zip Code 64734
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 27.00
Transaction ID : 519c0535-0773-410b-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 47.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.

Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Todd Ellis
Mailing Address P.O. Box 712
City Alexander State AR Zip Code 72002
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 95.00
Transaction ID : 33660636-e559-42eb-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Todd Ellis
Mailing Address P.O. Box 712
City Alexander State AR Zip Code 72002
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 43.50
Transaction ID : c0456634-530c-402a-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 138.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee OLynda Walker
Mailing Address 10000 Mount Pleasant Rd
City Midland State NC Zip Code 28107
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 90.00
Transaction ID : 9b78e5f9-04f6-4e98-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee OLynda Walker
Mailing Address 10000 Mount Pleasant Rd
City Midland State NC Zip Code 28107
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 18.60
Transaction ID : 7fd7f82a-4ee7-43bc-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 108.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Lee R Carter
Mailing Address 3110 Brentwood Rd
City Raleigh State NC Zip Code 27604
Purpose of Expenditure Salary Category/Type 001
Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 34.00
Transaction ID : d55d4185-edd1-48e7-9
Date of Disbursement or Obligation 11 / 02 / 2014
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 1087975.24
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Lee R Carter
Mailing Address 3110 Brentwood Rd
City Raleigh State NC Zip Code 27604
Purpose of Expenditure Mileage Category/Type 002
Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 7.50
Transaction ID : 29434318-7671-4933-a
Date of Disbursement or Obligation 11 / 02 / 2014
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 1087975.24
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 41.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Jordyn Kilbury
Mailing Address 5416 S Santa Fe Street
City Wichita State KS Zip Code 67216
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 110.00
Transaction ID : 6330b9c0-68d7-4f06-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Jordyn Kilbury
Mailing Address 5416 S Santa Fe Street
City Wichita State KS Zip Code 67216
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 20.10
Transaction ID : cadf996e-62b4-45cf-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 130.10
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Aleksandra B Padua
Mailing Address 110 Bridge gate Dr
City Cary State NC Zip Code 27519
Purpose of Expenditure Salary Category/Type 001

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 40.00
Transaction ID : f69d1087-a3f5-4bc4-9
Date of Disbursement or Obligation 11 / 02 / 2014

Name of Federal Candidate Ms. Kay Hagan
[] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Aleksandra B Padua
Mailing Address 110 Bridge gate Dr
City Cary State NC Zip Code 27519
Purpose of Expenditure Mileage Category/Type 002

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 11.34
Transaction ID : 2dea5c20-1d0d-44c5-a
Date of Disbursement or Obligation 11 / 02 / 2014

Name of Federal Candidate Ms. Kay Hagan
[] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 51.34
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.

Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Cynthia N Schmit
Mailing Address 2226 Taft Circle Apt 1
City Winchester State VA Zip Code 22601
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 65.00
Transaction ID : 5fcf2ff3-1a89-478d-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Michael Vidrine
Mailing Address 1103 West Wilson Street
City Ville Platte State LA Zip Code 70586
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 80.00
Transaction ID : 43addec5-bb07-49c7-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 145.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Michael Vidrine
Mailing Address 1103 West Wilson Street
City Ville Platte State LA Zip Code 70586
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 21.60
Transaction ID : 8ec5d987-4718-4b7f-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Joseph R English
Mailing Address 915 East Market Ave Apt 4
City Searcy State AR Zip Code 72143
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 90.00
Transaction ID : ac37e942-dde6-450b-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 111.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Joseph R English
Mailing Address 915 East Market Ave Apt 4
City Searcy State AR Zip Code 72143
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 39.00
Transaction ID : f1d29ef2-eb7a-4da6-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Laura U Logie
Mailing Address 2565 Shire Circle
City Harrisonburg State VA Zip Code 22801
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 70.00
Transaction ID : 1e26334b-dea4-47f6-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 109.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.

Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Lilly Green
Mailing Address 205 Medallion Circle
City Shreveport State LA Zip Code 71119
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 80.00
Transaction ID : 66b9e583-32d6-4f9d-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Lilly Green
Mailing Address 205 Medallion Circle
City Shreveport State LA Zip Code 71119
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 76.20
Transaction ID : 8b39d361-18bf-443f-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 156.20
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.

Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Gregory Green
Mailing Address 2506 Bolch Street
City Shreveport State LA Zip Code 71104
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 60.00
Transaction ID : 0823ece9-cff5-44f0-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Gregory Green
Mailing Address 2506 Bolch Street
City Shreveport State LA Zip Code 71104
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 78.00
Transaction ID : aca0315d-9dbf-48d0-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 138.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Theresa a Youngblood
Mailing Address 102 S Main Street Apt A2
City Berryville State VA Zip Code 22611
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 110.00
Transaction ID : 1b127341-109e-496e-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Sheri J Peace
Mailing Address 9685 Paula St
City Keithville State LA Zip Code 71047
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 100.00
Transaction ID : 225d1431-de3d-4c3a-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 210.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Sheri J Peace
Mailing Address 9685 Paula St
City Keithville State LA Zip Code 71047
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 46.20
Transaction ID : e8b83f61-e68d-4bd7-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Mary D Meens
Mailing Address 5724 SW Arrowhead Ct
City Topeka State KS Zip Code 66614
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 30.00
Transaction ID : 97ec32fa-60fe-4cdc-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 76.20
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Mary D Meens
Mailing Address 5724 SW Arrowhead Ct
City Topeka State KS Zip Code 66614
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 9.00
Transaction ID : 2f742fa3-3e04-471c-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Ashley n Thompson
Mailing Address 272 Westgate Ct Apt 6
City Lexington State NC Zip Code 27295
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 67.50
Transaction ID : d2a72ba2-6712-4433-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 76.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Ashley n Thompson
Mailing Address 272 Westgate Ct Apt 6
City Lexington State NC Zip Code 27295
Purpose of Expenditure Mileage Category/Type 002
Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 6.00
Transaction ID : c9b0fc9a-bc05-48ea-8
Date of Disbursement or Obligation 11 / 02 / 2014
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 1087975.24
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Greg Meens
Mailing Address 5724 SW Arrowhead Ct
City Topeka State KS Zip Code 66614
Purpose of Expenditure Salary Category/Type 001
Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 30.00
Transaction ID : 5b8a22a6-be93-4604-b
Date of Disbursement or Obligation 11 / 02 / 2014
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Calendar Year-To-Date Per Election for Office Sought 246310.99
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 36.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Randy G Lookabill
Mailing Address 200 Carawood Lane
City Lexington State NC Zip Code 27295
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 67.50
Transaction ID : 840c4dc3-1f52-494f-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Randy G Lookabill
Mailing Address 200 Carawood Lane
City Lexington State NC Zip Code 27295
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 22.50
Transaction ID : 56c3c18d-6b81-4634-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 90.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.

Ms. Emily Buchanan

[Electronically Filed]

Date

11 / 04 / 2014

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Chris McCoy
Mailing Address 1025 Cayley Ct
City High Point State NC Zip Code 27260
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 105.00
Transaction ID : bf2ba395-17f9-43db-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Chris McCoy
Mailing Address 1025 Cayley Ct
City High Point State NC Zip Code 27260
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 24.60
Transaction ID : 037bd3bc-0853-477e-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 129.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Danielle McCoy
Mailing Address 1025 Cayley Ct
City High Point State NC Zip Code 27260
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 105.00
Transaction ID : 25a69da4-1580-4caf-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Danielle McCoy
Mailing Address 1025 Cayley Ct
City High Point State NC Zip Code 27260
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 26.10
Transaction ID : 001f7cdf-2229-466f-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 131.10
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Heather Ainsworth
Mailing Address 9685 Paula St
City Keithville State LA Zip Code 71047
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 100.00
Transaction ID : 588d07cc-f37b-4a1f-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Heather Ainsworth
Mailing Address 9685 Paula St
City Keithville State LA Zip Code 71047
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 32.70
Transaction ID : 6db152a0-7658-4f2b-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 132.70
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Eleanor McCoy
Mailing Address 4902 Catawba Dr
City Greensboro State NC Zip Code 27407
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 105.00
Transaction ID : eb5806b2-494e-4a9b-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Eleanor McCoy
Mailing Address 4902 Catawba Dr
City Greensboro State NC Zip Code 27407
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 26.40
Transaction ID : b69fa6f5-0daa-48d8-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 131.40
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Jake Mathews
Mailing Address 6418 East 12 St
City Wichita State KS Zip Code 67206
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 10 / 31 / 2014
Amount 35.00
Transaction ID : 9032566b-ddae-42d0-9
Date of Disbursement or Obligation 10 / 31 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Jake Mathews
Mailing Address 6418 East 12 St
City Wichita State KS Zip Code 67206
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 10 / 31 / 2014
Amount 11.40
Transaction ID : bdc44c47-d9d8-4f43-8
Date of Disbursement or Obligation 10 / 31 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 46.40
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee ERIC TABARY
Mailing Address 6101 NORA ST
City METAIRIE State LA Zip Code 70003
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 70.00
Transaction ID : 11aa1194-f2e7-4834-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee ERIC TABARY
Mailing Address 6101 NORA ST
City METAIRIE State LA Zip Code 70003
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 230656.44

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 2.10
Transaction ID : 526b5218-4236-4e8b-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 72.10
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Rose M Aldapa
Mailing Address 14817 E 29th N
City Wichita State KS Zip Code 67228
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 10 / 31 / 2014
Amount 22.00
Transaction ID : f0fa8a20-3a8e-4870-8
Date of Disbursement or Obligation 10 / 31 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Rose M Aldapa
Mailing Address 14817 E 29th N
City Wichita State KS Zip Code 67228
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 10 / 31 / 2014
Amount 12.00
Transaction ID : 77b55ab2-cd05-412c-b
Date of Disbursement or Obligation 10 / 31 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 34.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Andy Ramos
Mailing Address 907 West Trail
City Dodge City State KS Zip Code 67801
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 10 / 31 / 2014
Amount 90.00
Transaction ID : bf50b60b-81cc-4e79-b
Date of Disbursement or Obligation 10 / 31 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Andy Ramos
Mailing Address 907 West Trail
City Dodge City State KS Zip Code 67801
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 10 / 31 / 2014
Amount 5.10
Transaction ID : c21d664d-b6f0-42d0-b
Date of Disbursement or Obligation 10 / 31 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 95.10
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Victor M Valdez
Mailing Address 1702 Central Ave
City Dodge City State KS Zip Code 67801
Purpose of Expenditure Salary Category/Type 001
Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 90.00
Transaction ID : c78bd703-a2ca-4c35-b
Date of Disbursement or Obligation 11 / 01 / 2014
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Calendar Year-To-Date Per Election for Office Sought 246310.99
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Victor M Valdez
Mailing Address 1702 Central Ave
City Dodge City State KS Zip Code 67801
Purpose of Expenditure Mileage Category/Type 002
Date of Public Distribution/Dissemination 10 / 31 / 2014
Amount 5.10
Transaction ID : 69afe8c4-cde1-4c4f-b
Date of Disbursement or Obligation 11 / 01 / 2014
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Calendar Year-To-Date Per Election for Office Sought 246310.99
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 95.10
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Paulette M Carrieri
Mailing Address 4805 TuPenny Lane
City Raleigh State NC Zip Code 27606
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 10 / 31 / 2014
Amount 40.00
Transaction ID : f6dd5da0-320f-4fd4-b
Date of Disbursement or Obligation 10 / 31 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Paulette M Carrieri
Mailing Address 4805 TuPenny Lane
City Raleigh State NC Zip Code 27606
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 10 / 31 / 2014
Amount 2.40
Transaction ID : 1a77747f-7459-4988-b
Date of Disbursement or Obligation 10 / 31 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 42.40
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Hannah K Smith
Mailing Address 633 Scott Dr
City Gibsonville State NC Zip Code 27249
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 90.00
Transaction ID : 1576b54a-316b-45c9-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Hannah K Smith
Mailing Address 633 Scott Dr
City Gibsonville State NC Zip Code 27249
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 16.80
Transaction ID : 4b2f824c-5ffc-4a62-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 106.80
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Dylan J Sparks
Mailing Address 915 East Market Ave
City Searcy State AR Zip Code 72149
Purpose of Expenditure Salary Category/Type 001
Date of Public Distribution/Dissemination 10/31/2014
Amount 100.00
Transaction ID : 5c616271-73a3-4dce-8
Date of Disbursement or Obligation 10/31/2014
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Calendar Year-To-Date Per Election for Office Sought 277575.33
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Dylan J Sparks
Mailing Address 915 East Market Ave
City Searcy State AR Zip Code 72149
Purpose of Expenditure Mileage Category/Type 002
Date of Public Distribution/Dissemination 10/31/2014
Amount 64.20
Transaction ID : a6511138-e57f-4d35-8
Date of Disbursement or Obligation 10/31/2014
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Calendar Year-To-Date Per Election for Office Sought 277575.33
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 164.20
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11/04/2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Kaylan N Swanson
Mailing Address 633 Scott Dr
City Gibsonville State NC Zip Code 27249
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 90.00
Transaction ID : 1491a018-9c6b-428f-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Heather N Montgomery
Mailing Address 106 Wyncrest Ct
City Hendersonville State TN Zip Code 37075
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 10 / 31 / 2014
Amount 60.00
Transaction ID : 7648bb4b-6324-4e1b-9
Date of Disbursement or Obligation 10 / 31 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 150.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Heather N Montgomery
Mailing Address 106 Wyncrest Ct
City Hendersonville State TN Zip Code 37075
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 10 / 31 / 2014
Amount 42.60
Transaction ID : cbe55726-cbb2-40a6-b
Date of Disbursement or Obligation 10 / 31 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee James A Sears
Mailing Address 305 Averroe Dr
City Apex State NC Zip Code 27502
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 10 / 30 / 2014
Amount 45.00
Transaction ID : d00a2027-8e96-4971-a
Date of Disbursement or Obligation 10 / 30 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 87.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Christine Stevens
Mailing Address 100 Asbury Ct
City Winchester State VA Zip Code 22602
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 90.00
Transaction ID : 79e42c33-1ef6-424c-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Jazmine d Conner
Mailing Address 100 ASBURY CT
City WINCHESTER State VA Zip Code 22602
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 90.00
Transaction ID : b5ff7c2c-1d4e-4178-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 180.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Jon E Conner
Mailing Address 100 Asbury Ct
City Winchester State VA Zip Code 22602
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 90.00
Transaction ID : aac5b536-0087-445e-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Rodney O Culbreath
Mailing Address 100 Asbury Ct
City Winchester State VA Zip Code 22602
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 90.00
Transaction ID : 7888aad1-95a7-4a09-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 180.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Rodney D Culbreth
Mailing Address 100 Asbury CT 3200 Dam Neck Rd
City Winchester State VA Zip Code 22602
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 90.00
Transaction ID : ee0d2f55-b8ad-4ec5-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Rze Culbreath
Mailing Address 100 Asbury Ct
City Winchester State VA Zip Code 22602
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 90.00
Transaction ID : 3f64a977-47f0-4ce2-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 180.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Randy M Gold
Mailing Address 1436 Haigs Creek Dr
City Elgin State SC Zip Code 29045
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 120.00
Transaction ID : 432af228-0c71-4173-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Randy M Gold
Mailing Address 1436 Haigs Creek Dr
City Elgin State SC Zip Code 29045
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 88.95
Transaction ID : 1740076b-e933-41bb-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 208.95, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures

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.

Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee: Kaleigh J Wagner
Mailing Address: 18065 Wayne Rd
City: Odessa, State: FL, Zip Code: 33556
Purpose of Expenditure: Salary, Category/Type: 001
Date of Public Distribution/Dissemination: 11/01/2014
Amount: 120.00
Transaction ID: 416e322b-82c1-41df-a
Date of Disbursement or Obligation: 11/01/2014
Name of Federal Candidate: Mr. Mark L Pryor, Support: [], Oppose: [X]
Office Sought: [] House, [X] Senate, District: 00, State: AR
Calendar Year-To-Date Per Election for Office Sought: 277575.33
Disbursement For: [] Primary, [X] General, [] Other (specify)

Full Name of Payee: Brandon Wheeler
Mailing Address: 10112 Piney Creek Ct
City: Charolette, State: NC, Zip Code: 28215
Purpose of Expenditure: Salary, Category/Type: 001
Date of Public Distribution/Dissemination: 11/02/2014
Amount: 50.00
Transaction ID: 4e0e38dd-5ee0-4386-9
Date of Disbursement or Obligation: 11/02/2014
Name of Federal Candidate: Mr. Mark L Pryor, Support: [], Oppose: [X]
Office Sought: [] House, [X] Senate, District: 00, State: AR
Calendar Year-To-Date Per Election for Office Sought: 277575.33
Disbursement For: [] Primary, [X] General, [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 170.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

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.
Ms. Emily Buchanan [Electronically Filed] Date 11/04/2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Brandon Wheeler
Mailing Address 10112 Piney Creek Ct
City Charolette State NC Zip Code 28215
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 25.20
Transaction ID : 83eca76d-f1cf-4243-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Caleb J Ellicott
Mailing Address 56893 S 695 rd
City Colcord State OK Zip Code 74338
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 10 / 31 / 2014
Amount 20.00
Transaction ID : d24e0d59-e74b-44be-b
Date of Disbursement or Obligation 10 / 31 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 45.20
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.

Ms. Emily Buchanan
Signature

[Electronically Filed]

Date 11 / 04 / 2014

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Dorthy Meyer
Mailing Address 11707 South African Street
City Olathe State KS Zip Code 66062
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 30.00
Transaction ID : e6091377-40b2-4f78-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Campaign Marketing Strategies
Mailing Address 3240 Wilson Blvd 202
City Arlington State VA Zip Code 22201
Purpose of Expenditure Robocalls Category/Type 004
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 4166.80
Transaction ID : 72216ba8-d49b-44ee-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 4196.80, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Heidi R Robinson
Mailing Address 3722 SE Evans Dr
City Topeka State KS Zip Code 66609
Purpose of Expenditure Salary Category/Type 001

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 30.00
Transaction ID : ee626e2c-7ab2-43e8-b
Date of Disbursement or Obligation 11 / 02 / 2014

Name of Federal Candidate Mr. Greg Orman
Support [] Oppose [X]
Office Sought: [] House [X] Senate
District: 00 State: KS

Disbursement For: [] Primary [X] General 2014
[] Other (specify)

Full Name of Payee Heidi R Robinson
Mailing Address 3722 SE Evans Dr
City Topeka State KS Zip Code 66609
Purpose of Expenditure Mileage Category/Type 002

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 5.70
Transaction ID : cdfa30da-ee0a-436c-8
Date of Disbursement or Obligation 11 / 02 / 2014

Name of Federal Candidate Mr. Greg Orman
Support [] Oppose [X]
Office Sought: [] House [X] Senate
District: 00 State: KS

Disbursement For: [] Primary [X] General 2014
[] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 35.70
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.

Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Julie M Gentry
Mailing Address 314 S Main St
City Roxboro State NC Zip Code 27573
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 35.00
Transaction ID : 1db06a3c-48c6-42a8-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Julie M Gentry
Mailing Address 314 S Main St
City Roxboro State NC Zip Code 27573
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1087975.24

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 8.64
Transaction ID : 3124c799-8df2-4b50-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 43.64
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Marisa E Surdyke
Mailing Address 1020 N 2nd Street
City Atchison State KS Zip Code 66002
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 10 / 31 / 2014
Amount 20.00
Transaction ID : 424db074-239b-47dd-a
Date of Disbursement or Obligation 10 / 31 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Marisa E Surdyke
Mailing Address 1020 N 2nd Street
City Atchison State KS Zip Code 66002
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 40.00
Transaction ID : fd94a399-776f-4bc7-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 60.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.

Ms. Emily Buchanan

[Electronically Filed]

Date

11 / 04 / 2014

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Rebecca M Blackwell
Mailing Address 1020 North 2nd St
City Atchison State KS Zip Code 66002
Purpose of Expenditure Salary Category/Type 001

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 40.00
Transaction ID : 81c62996-1867-48ce-b
Date of Disbursement or Obligation 11 / 02 / 2014

Name of Federal Candidate Mr. Greg Orman
Support [] Oppose [X]
Office Sought: [] President [X] Senate
District: 00 State: KS

Disbursement For: [] Primary [X] General 2014
[] Other (specify)

Calendar Year-To-Date Per Election for Office Sought 246310.99

Full Name of Payee Katelyn Stringer
Mailing Address 2134 Oxford Dr
City Salina State KS Zip Code 67401
Purpose of Expenditure Salary Category/Type 001

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 50.00
Transaction ID : 84df4952-e797-46aa-a
Date of Disbursement or Obligation 11 / 02 / 2014

Name of Federal Candidate Mr. Greg Orman
Support [] Oppose [X]
Office Sought: [] President [X] Senate
District: 00 State: KS

Disbursement For: [] Primary [X] General 2014
[] Other (specify)

Calendar Year-To-Date Per Election for Office Sought 246310.99

(a) SUBTOTAL of Itemized Independent Expenditures 90.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.

Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Katelyn Stringer
Mailing Address 2134 Oxford Dr
City Salina State KS Zip Code 67401
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 2.66
Transaction ID : f2122223-89cc-4471-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Mry S Everly
Mailing Address 787 N 1851 Diagonal Rd
City Lecompton State KS Zip Code 66050
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 20.00
Transaction ID : 8364c472-620e-4b51-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 22.66
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee: Mry S Everly
Mailing Address: 787 N 1851 Diagonal Rd
City: Lecompton State: KS Zip Code: 66050
Purpose of Expenditure: Mileage Category/Type: 002
Name of Federal Candidate: Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought: 246310.99

Date of Public Distribution/Dissemination: 11 / 02 / 2014
Amount: 18.00
Transaction ID: 62214b86-e5e4-48af-8
Date of Disbursement or Obligation: 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee: Facebook, Inc.
Mailing Address: 1601 Willow Road
City: Menlo Park State: CA Zip Code: 94025
Purpose of Expenditure: Facebook ad Category/Type: 004
Name of Federal Candidate: Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought: 1087975.24

Date of Public Distribution/Dissemination: 11 / 02 / 2014
Amount: 500.00
Transaction ID: e8efe67d-f843-4ce4-8
Date of Disbursement or Obligation: 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures: 518.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date: 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Chad Stieben
Mailing Address 16864 Stillwell Rd
City Bonner Springs State KS Zip Code 66012
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 10.00
Transaction ID : 1ec72e40-28cf-478a-8
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Chad Stieben
Mailing Address 16864 Stillwell Rd
City Bonner Springs State KS Zip Code 66012
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 4.20
Transaction ID : 7745f1ea-5eff-4cbc-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 14.20
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Andrea M Gatts
Mailing Address 6894 106th
City Ozawkie State KS Zip Code 66070
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 10.00
Transaction ID : 7238aedc-9e79-4525-9
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Brenda L McCune
Mailing Address 1254 Fleming St Apt 6
City Conway State AR Zip Code 72032
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 60.00
Transaction ID : 12c769e9-845d-4076-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 70.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Brenda L McCune
Mailing Address 1254 Fleming St Apt 6
City Conway State AR Zip Code 72032
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 277575.33

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 32.70
Transaction ID : 319ee515-4016-498e-b
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Shantal C Culbreath
Mailing Address 4691 Hercules Lane
City Woodbridge State VA Zip Code 22193
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 10 / 31 / 2014
Amount 100.00
Transaction ID : 0cfd6c16-ae06-4ef9-9
Date of Disbursement or Obligation 10 / 31 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 132.70
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Shantal C Culbreath
Mailing Address 4691 Hercules Lane
City Woodbridge State VA Zip Code 22193
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 100.00
Transaction ID : e9c53d7a-0e07-4cd5-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Shantal C Culbreath
Mailing Address 4691 Hercules Lane
City Woodbridge State VA Zip Code 22193
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 246310.99

Date of Public Distribution/Dissemination 11 / 02 / 2014
Amount 60.00
Transaction ID : 59771fe8-8ca2-4304-a
Date of Disbursement or Obligation 11 / 02 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 160.00, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 14094.52

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.
Ms. Emily Buchanan [Electronically Filed] Date 11 / 04 / 2014
Signature