

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

NextGen Committee

ADDRESS (number and street)

555 Capitol Mall, Suite 1425

☐ Check if different than previously reported. (ACC)

Sacramento

CA

95814

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00542779

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☒ Special (12S)☐ Runoff (12R)

Election on

M M /

D D /

Y Y Y Y Y Y

04

30

2013

in the
State of

MA

(d) 30-Day

POST-Election

Report for the:

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

Election on

M M /

D D /

Y Y Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y Y Y

01

01

2013

through

M M /

D D /

Y Y Y Y Y Y

04

10

2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Thomas F. Steyer

Signature of Treasurer

Thomas F. Steyer

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

06

14

2013

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

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NextGen Committee

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 01 / 01 / 2013

To:

 M M / D D / Y Y Y Y Y
 04 / 10 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2013		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	0.00	
(c) Total Receipts (from Line 19)	751792.90	751792.90
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	751792.90	751792.90
7. Total Disbursements (from Line 31)	539572.90	539572.90
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	212220.00	212220.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	225664.06	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

NextGen Committee

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 01 / 01 / 2013

To:

 M M / D D / Y Y Y Y Y
 04 / 10 / 2013
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

751792.90

751792.90

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

751792.90

751792.90

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

751792.90

751792.90

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

751792.90

751792.90

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

751792.90

751792.90

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	113992.90	113992.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	113992.90	113992.90
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	250000.00	250000.00
24. Independent Expenditures (use Schedule E)	145580.00	145580.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	30000.00	30000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	539572.90	539572.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	539572.90	539572.90

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	751792.90	751792.90
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	751792.90	751792.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	113992.90	113992.90
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	113992.90	113992.90

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

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

FOR LINE NUMBER: PAGE 6 OF 31
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NextGen Committee

Full Name (Last, First, Middle Initial)

A. Fahr LLC

Mailing Address 351 California Street, Suite 1200

City State Zip Code
 San Francisco CA 94104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1792.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2013

Transaction ID : NONA157

Amount of Each Receipt this Period

1792.90

In-kind contribution: Travel Expenses; 3/31 - 4/2

Full Name (Last, First, Middle Initial)

B. Thomas F. Steyer

Mailing Address One Maritime Plaza, Suite 2100

City State Zip Code
 San Francisco CA 94111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Next Generation

Co-founding Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 19 / 2013

Transaction ID : INCA1

Amount of Each Receipt this Period

750000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

751792.90

751792.90

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 31

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

NextGen Committee

Full Name (Last, First, Middle Initial)

A. Fahr LLC

Mailing Address 351 California Street, Suite 1200

City San Francisco State CA Zip Code 94104

Purpose of Disbursement
In-kind contribution: Travel Expenses; 3/31 - 4/2

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2013
Transaction ID : NONB157

Amount of Each Disbursement this Period

1792.90

Full Name (Last, First, Middle Initial)

B. Sadler Strategic Media, Inc.

Mailing Address 12103 Viewcrest Road

City Studio City State CA Zip Code 91604

Purpose of Disbursement
Aerial Banners

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 27 / 2013
Transaction ID : EXPB19

Amount of Each Disbursement this Period

49700.00

Full Name (Last, First, Middle Initial)

C. Sadler Strategic Media, Inc.

Mailing Address 12103 Viewcrest Road

City Studio City State CA Zip Code 91604

Purpose of Disbursement
Aerial Banners

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 08 / 2013
Transaction ID : EXPB26

Amount of Each Disbursement this Period

7500.00

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

58992.90

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

Form/Schedule: SB21B

Transaction ID : EXPB19

Payment made in current period and disseminated in subsequent period

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 31

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

NextGen Committee

Full Name (Last, First, Middle Initial)

A. Winning Connections, Inc.

Mailing Address 317 Pennsylvania Ave., SE,
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
Robocalls

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 08 / 2013

Transaction ID : EXPB23

Amount of Each Disbursement this Period

55000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ►

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

55000.00

113992.90

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SB21B

Transaction ID : EXPB23

Payment made in current period and disseminated in subsequent period

Form/Schedule:

Transaction ID:

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

NextGen Committee

A. LCV Victory Fund

Mailing Address 1920 L Street, NW, Suite 800

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement	Contribution

Candidate Name

LCV Victory Fund

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State: District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : EXPB30

Amount of Each Disbursement this Period

250000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State: District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

250000.00

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

250000.00

	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

NextGen Committee

A. American Values Network

Mailing Address 1901 North Ft. Myer Drive,
Suite 900

City	State	Zip Code
Arlington	VA	22209

Purpose of Disbursement	Civic Donation for Issue Advocacy
-------------------------	-----------------------------------

Candidate Name _____

012

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

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

Transaction ID : EXPB29

Amount of Each Disbursement this Period

30000.00

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

A diagram of a rectangular frame. It consists of a horizontal beam at the top and a horizontal beam at the bottom, connected by vertical supports. The top beam has 10 evenly spaced vertical hangers. The bottom beam has 10 evenly spaced vertical hangers. The left vertical support is a single line. The right vertical support is a single line. The frame is open on the right side.

SUBTOTAL of Disbursements This Page (optional).....

30000.00

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

30000.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 13 OF 31

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

NextGen Committee

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

Adams , Thomas

Nature of Debt (Purpose):
Consulting Services

Mailing Address 176 Valdeflores Drive

City State

Zip Code

Burlingame

CA

94010

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD17

Amount Incurred This Period

7500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7500.00

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

Barnes Mosher Whitehurst Lauter & Partners, Inc.

Nature of Debt (Purpose):
Consulting ServicesMailing Address 660 Mission St., 2nd Floor,
Ste 200

City State

Zip Code

San Francisco

CA

94105

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD33

Amount Incurred This Period

6250.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6250.00

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

Barnes Mosher Whitehurst Lauter & Partners, Inc.

Nature of Debt (Purpose):
Consulting ServicesMailing Address 660 Mission St., 2nd Floor,
Ste 200

City

State

Zip Code

San Francisco

CA

94105

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD145

Amount Incurred This Period

3125.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3125.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

16875.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 14 OF 31

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

NextGen Committee

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

Benenson Strategy Group

Nature of Debt (Purpose):
PollingMailing Address 720 South Colorado Blvd.,
Suite 500N

City	State	Zip Code
Denver	CO	80246

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD31

Amount Incurred This Period

27150.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

27150.00

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

Benenson Strategy Group

Nature of Debt (Purpose):
Travel & ExpensesMailing Address 720 South Colorado Blvd.,
Suite 500N

City	State	Zip Code
Denver	CO	80246

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD139

Amount Incurred This Period

9092.29

Payment This Period

0.00

Outstanding Balance at Close of This Period

9092.29

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

Benenson Strategy Group

Nature of Debt (Purpose):
Focus Group ManagementMailing Address 720 South Colorado Blvd.,
Suite 500N

City	State	Zip Code
Denver	CO	80246

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD140

Amount Incurred This Period

31615.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

31615.00

1) SUBTOTALS This Period This Page (optional)..... ►

67857.29

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 15 OF 31

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

NextGen Committee

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

Campaign Industries, LLC

Nature of Debt (Purpose):

Consulting Services; 3/22 - 4/24

Mailing Address 1501 Dempster Street

City State

Zip Code

Evanston

IL

60201

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD127

Amount Incurred This Period

15000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15000.00

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

Campaign Industries, LLC

Nature of Debt (Purpose):

Poster production for press event

Mailing Address 1501 Dempster Street

City State

Zip Code

Evanston

IL

60201

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD128

Amount Incurred This Period

45.15

Payment This Period

0.00

Outstanding Balance at Close of This Period

45.15

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

Campaign Industries, LLC

Nature of Debt (Purpose):

Shipping

Mailing Address 1501 Dempster Street

City

State

Zip Code

Evanston

IL

60201

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD129

Amount Incurred This Period

194.46

Payment This Period

0.00

Outstanding Balance at Close of This Period

194.46

1) SUBTOTALS This Period This Page (optional)..... ►

15239.61

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 16 OF 31

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

NextGen Committee

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

Campaign Industries, LLC

Nature of Debt (Purpose):

Travel Expenses

Mailing Address 1501 Dempster Street

City State

Zip Code

Evanston

IL

60201

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD130

Amount Incurred This Period

141.20

Payment This Period

0.00

Outstanding Balance at Close of This Period

141.20

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

DGA Productions

Nature of Debt (Purpose):

Camera Rental for Press Conference

Mailing Address 50 Hunt Street

City State

Zip Code

Watertown

MA

02472

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD34

Amount Incurred This Period

1351.13

Payment This Period

0.00

Outstanding Balance at Close of This Period

1351.13

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

Erin Lehane

Nature of Debt (Purpose):

Press Consulting

Mailing Address 2247 Clay Street

City

State

Zip Code

San Francisco

CA

94115

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD172

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) SUBTOTALS This Period This Page (optional)..... ►

3992.33

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 17 OF 31

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

NextGen Committee

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

Erin Lehane

Nature of Debt (Purpose):

Travel Expenses

Mailing Address 2247 Clay Street

City State

Zip Code

San Francisco

CA

94115

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD173

Amount Incurred This Period

1860.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1860.00

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

Erin Lehane

Nature of Debt (Purpose):

Press Consulting

Mailing Address 2247 Clay Street

City State

Zip Code

San Francisco

CA

94115

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD174

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

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

Erin Lehane

Nature of Debt (Purpose):

Travel Expenses

Mailing Address 2247 Clay Street

City

State

Zip Code

San Francisco

CA

94115

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD175

Amount Incurred This Period

492.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

492.00

1) SUBTOTALS This Period This Page (optional)..... ►

4852.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 18 OF 31

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

NextGen Committee

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

Mark Fabiani, LLC

Nature of Debt (Purpose):
Consulting Services

Mailing Address 939 Coast Blvd., Suite 4D

City State

Zip Code

La Jolla

CA

92037

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD46

Amount Incurred This Period

12500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

12500.00

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

Markham Group, LLC

Nature of Debt (Purpose):
Consulting Services

Mailing Address 1000 West 3rd Street

City State

Zip Code

Little Rock

AR

72201

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD15

Amount Incurred This Period

38100.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

38100.00

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

Tigercomm

Nature of Debt (Purpose):
Consulting Services; 3/1 - 3/31

Mailing Address 1901 N. Fort Myer Drive, Suite 850

City

State

Zip Code

Arlington

VA

22209

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD148

Amount Incurred This Period

32000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

32000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

82600.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 19 OF 31

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

NextGen Committee

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

Tigercomm

Nature of Debt (Purpose):

Consulting Services; 4/1 - 4/30

Mailing Address 1901 N. Fort Myer Drive, Suite 850

City State

Zip Code

Arlington

VA

22209

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD151

Amount Incurred This Period

28800.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

28800.00

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

Tigercomm

Nature of Debt (Purpose):

Travel Expenses

Mailing Address 1901 N. Fort Myer Drive, Suite 850

City State

Zip Code

Arlington

VA

22209

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD152

Amount Incurred This Period

2247.83

Payment This Period

0.00

Outstanding Balance at Close of This Period

2247.83

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

Tigercomm

Nature of Debt (Purpose):

Consulting

Mailing Address 1901 N. Fort Myer Drive, Suite 850

City

State

Zip Code

Arlington

VA

22209

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD163

Amount Incurred This Period

3200.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3200.00

1) SUBTOTALS This Period This Page (optional)..... ►

34247.83

2) TOTALS This Period (last page this line number only)..... ►

225664.06

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

225664.06

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 20 OF 31
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00542779 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Adams , Thomas [MEMO ITEM]		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M M / D D D / Y Y Y Y Y Y </div> 04 / 02 / 2013	
Mailing Address 176 Valdeflores Drive		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">7500.00</div>	
City Burlingame	State CA		
Purpose of Expenditure Consulting Services	Category/ Type 24A	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <u>MA</u> District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) <u>Special 2013</u>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">266845.81</div>			

Full Name (Last, First, Middle Initial) of Payee Barnes Mosher Whitehurst Lauter & Partners, Inc. [MEMO ITEM]		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M M / D D D / Y Y Y Y Y Y </div> 04 / 10 / 2013	
Mailing Address 660 Mission St., 2nd Floor, Ste 200		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3125.00</div>	
City San Francisco	State CA		
Purpose of Expenditure Consulting Services	Category/ Type 24A	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <u>MA</u> District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) <u>Special 2013</u>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">266845.81</div>			

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"></div>

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.

Thomas F. Steyer

[Electronically Filed]

Signature

Date

M M M / D D D / Y Y Y Y Y Y

 06 / 14 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 21 OF 31
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00542779 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Campaign Industries, LLC [MEMO ITEM]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">04 / 10 / 2013</div> </div>	
Mailing Address 1501 Dempster Street		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">194.46</div>	
City Evanston	State IL		
Purpose of Expenditure Shipping	Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">24A</div>	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">266845.81</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) ▶ Special 2013	

Full Name (Last, First, Middle Initial) of Payee Campaign Industries, LLC [MEMO ITEM]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">04 / 10 / 2013</div> </div>	
Mailing Address 1501 Dempster Street		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">15000.00</div>	
City Evanston	State IL		
Purpose of Expenditure Consulting Services; 3/22 - 4/24	Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">24A</div>	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">266845.81</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) ▶ Special 2013	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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.

Thomas F. Steyer

[Electronically Filed]

 Date

MM / DD / YYYY

06 / 14 / 2013

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 22 OF 31
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00542779 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y			
Full Name (Last, First, Middle Initial) of Payee Campaign Industries, LLC [MEMO ITEM]		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 04 / 10 / 2013 </div>	
Mailing Address 1501 Dempster Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 45.15 </div>	
City Evanston State IL Zip Code 60201		Transaction ID : PDTE25	
Purpose of Expenditure Poster production for press event		Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Category/Type 24A		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	
Calendar Year-To-Date Per Election for Office Sought 266845.81			
Full Name (Last, First, Middle Initial) of Payee Campaign Industries, LLC [MEMO ITEM]		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 04 / 10 / 2013 </div>	
Mailing Address 1501 Dempster Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 141.20 </div>	
City Evanston State IL Zip Code 60201		Transaction ID : PDTE26	
Purpose of Expenditure Travel Expenses		Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Category/Type 24A		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	
Calendar Year-To-Date Per Election for Office Sought 266845.81			
(a) SUBTOTAL of Itemized Independent Expenditures.....		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
(c) TOTAL Independent Expenditures.....		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
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.			
Signature <u>Thomas F. Steyer</u>		Date M M / D D / Y Y Y Y Y Y 06 / 14 / 2013	
[Electronically Filed]			

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 23 OF 31
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00542779 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Erin Lehane [MEMO ITEM]		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M M / D D D / Y Y Y Y Y Y </div> 04 / 02 / 2013	
Mailing Address 2247 Clay Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 2500.00 </div>	
City San Francisco	State CA		
Purpose of Expenditure Press Consulting	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 24A </div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:	
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 266845.81 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	

Transaction ID : PDTE47

Full Name (Last, First, Middle Initial) of Payee Erin Lehane [MEMO ITEM]		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M M / D D D / Y Y Y Y Y Y </div> 04 / 02 / 2013	
Mailing Address 2247 Clay Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 1860.00 </div>	
City San Francisco	State CA		
Purpose of Expenditure Travel Expenses	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 24A </div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:	
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 266845.81 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	

Transaction ID : PDTE48

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 0.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 0.00 </div>

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.

Thomas F. Steyer

[Electronically Filed]

Signature

Date

M M M / D D D / Y Y Y Y Y Y

 06 / 14 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 24 OF 31
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00542779 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Markham Group, LLC [MEMO ITEM]		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 03 / 29 / 2013 </div>	
Mailing Address 1000 West 3rd Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 38100.00 </div>	
City Little Rock	State AR		
Purpose of Expenditure Consulting Services	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:	
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 266845.81 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	

Transaction ID : PDTE7

Full Name (Last, First, Middle Initial) of Payee Portal A Limited		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 04 / 01 / 2013 </div>	
Mailing Address 520 Waller Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 40000.00 </div>	
City San Francisco	State CA		
Purpose of Expenditure YouTube Video	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:	
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 266845.81 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	

Transaction ID : EDTEALC1

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 40000.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 40000.00 </div>

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.

Thomas F. Steyer

[Electronically Filed]

Signature

Date

M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 25 OF 31
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00542779 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Sadler Strategic Media, Inc.		Date M M M / D D D / Y Y Y Y Y Y 03 / 22 / 2013	
Mailing Address 12103 Viewcrest Road		Amount 27940.00	
City Studio City	State CA	Zip Code 91604	Transaction ID : EDTEALC2
Purpose of Expenditure Video Mobile Billboards	Category/ Type 24A	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	State: MA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) _____ Special 2013	
Calendar Year-To-Date Per Election for Office Sought 266845.81			

Full Name (Last, First, Middle Initial) of Payee Sadler Strategic Media, Inc.		Date M M M / D D D / Y Y Y Y Y Y 03 / 27 / 2013	
Mailing Address 12103 Viewcrest Road		Amount 54700.00	
City Studio City	State CA	Zip Code 91604	Transaction ID : EDTEALC3
Purpose of Expenditure Aerial Banners	Category/ Type 24A	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	State: MA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) _____ Special 2013	
Calendar Year-To-Date Per Election for Office Sought 266845.81			

(a) SUBTOTAL of Itemized Independent Expenditures.....	82640.00
(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.

Thomas F. Steyer

[Electronically Filed]

Signature

Date

M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 26 OF 31
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00542779 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Sadler Strategic Media, Inc.		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 04 / 01 / 2013 </div>
Mailing Address 12103 Viewcrest Road		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 22940.00 </div>
City State Zip Code Studio City CA 91604	Transaction ID : EDTEALC4	
Purpose of Expenditure Video Mobile Billboards	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 24A </div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 266845.81 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special 2013

Full Name (Last, First, Middle Initial) of Payee Tigercomm [MEMO ITEM]		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 04 / 10 / 2013 </div>
Mailing Address 1901 N. Fort Myer Drive, Suite 850		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 4800.00 </div>
City State Zip Code Arlington VA 22209	Transaction ID : PDTE33	
Purpose of Expenditure Design & Pitching for Video Mobile Billboards	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 24A </div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 266845.81 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special 2013

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 22940.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 22940.00 </div>

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.

Thomas F. Steyer

[Electronically Filed]

Date

06 / 14 / 2013

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 27 OF 31
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee		FEC IDENTIFICATION NUMBER ▼ C C00542779	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name (Last, First, Middle Initial) of Payee Tigercomm [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 04 / 10 / 2013	
Mailing Address 1901 N. Fort Myer Drive, Suite 850		Amount 8000.00	
City Arlington	State VA	Zip Code 22209	Transaction ID : PDTE34
Purpose of Expenditure Aerial banners design & pitch	Category/ Type 24A	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 266845.81		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	
Full Name (Last, First, Middle Initial) of Payee Tigercomm [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 04 / 10 / 2013	
Mailing Address 1901 N. Fort Myer Drive, Suite 850		Amount 1600.00	
City Arlington	State VA	Zip Code 22209	Transaction ID : PDTE35
Purpose of Expenditure Consulting for Blog Piece	Category/ Type 24A	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 266845.81		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	
(a) SUBTOTAL of Itemized Independent Expenditures.....		0.00	
(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.			
Thomas F. Steyer		[Electronically Filed]	
Signature		Date 06 / 14 / 2013	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 28 OF 31
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee		FEC IDENTIFICATION NUMBER ▼ C C00542779	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name (Last, First, Middle Initial) of Payee Tigercomm [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 04 / 10 / 2013	
Mailing Address 1901 N. Fort Myer Drive, Suite 850		Amount 1600.00	
City Arlington	State VA	Zip Code 22209	Transaction ID : PDTE36
Purpose of Expenditure Consulting for Blog Piece	Category/ Type 24A	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	State: MA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	
Calendar Year-To-Date Per Election for Office Sought 266845.81			
Full Name (Last, First, Middle Initial) of Payee Tigercomm [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 04 / 10 / 2013	
Mailing Address 1901 N. Fort Myer Drive, Suite 850		Amount 8000.00	
City Arlington	State VA	Zip Code 22209	Transaction ID : PDTE37
Purpose of Expenditure Aerial banners design & pitch	Category/ Type 24A	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	State: MA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	
Calendar Year-To-Date Per Election for Office Sought 266845.81			
(a) SUBTOTAL of Itemized Independent Expenditures.....		0.00	
(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.			
Thomas F. Steyer Signature		[Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 06 / 14 / 2013	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 29 OF 31
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00542779 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Tigercomm [MEMO ITEM]		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM</div> <div style="border: 1px solid black; padding: 2px;">DD</div> <div style="border: 1px solid black; padding: 2px;">YYYY</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">04</div> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">2013</div> </div>	
Mailing Address 1901 N. Fort Myer Drive, Suite 850		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8000.00</div>	
City Arlington	State VA	Zip Code 22209	Transaction ID : PDTE38
Purpose of Expenditure Kick-off press conference		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>	
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">266845.81</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	

Full Name (Last, First, Middle Initial) of Payee Tigercomm [MEMO ITEM]		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM</div> <div style="border: 1px solid black; padding: 2px;">DD</div> <div style="border: 1px solid black; padding: 2px;">YYYY</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">04</div> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">2013</div> </div>	
Mailing Address 1901 N. Fort Myer Drive, Suite 850		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4800.00</div>	
City Arlington	State VA	Zip Code 22209	Transaction ID : PDTE39
Purpose of Expenditure High Noon Letter		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>	
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">266845.81</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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.

Thomas F. Steyer

[Electronically Filed]

Date

MM

DD

YYYY

06

14

2013

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 30 OF 31
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00542779 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Tigercomm [MEMO ITEM]		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 04 / 10 / 2013 </div>	
Mailing Address 1901 N. Fort Myer Drive, Suite 850		Amount <div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y Y Y 3200.00 </div>	
City Arlington	State VA		
Purpose of Expenditure Open Letter	Category/ Type 24A	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought Y Y Y Y Y Y Y Y 266845.81		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	

Full Name (Last, First, Middle Initial) of Payee Tigercomm [MEMO ITEM]		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 04 / 10 / 2013 </div>	
Mailing Address 1901 N. Fort Myer Drive, Suite 850		Amount <div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y Y Y 9600.00 </div>	
City Arlington	State VA		
Purpose of Expenditure Production & Pitch Infographic	Category/ Type 24A	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought Y Y Y Y Y Y Y Y 266845.81		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y Y Y 0.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y Y Y </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y Y Y </div>

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.

Thomas F. Steyer

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 06 / 14 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 31 OF 31
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00542779 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Tigercomm [MEMO ITEM]		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM</div> <div style="border: 1px solid black; padding: 2px;">DD</div> <div style="border: 1px solid black; padding: 2px;">YYYY</div> </div>	
Mailing Address 1901 N. Fort Myer Drive, Suite 850		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3200.00</div>	
City Arlington	State VA	Zip Code 22209	Transaction ID : PDTE43
Purpose of Expenditure Pitch for YouTube Ads	Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">24A</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:	
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">266845.81</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special 2013	

Full Name (Last, First, Middle Initial) of Payee		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM</div> <div style="border: 1px solid black; padding: 2px;">DD</div> <div style="border: 1px solid black; padding: 2px;">YYYY</div> </div>	
Mailing Address		Amount <div style="border: 1px solid black; padding: 2px;"></div>	
City	State	Zip Code	
Purpose of Expenditure	Category/ Type <div style="border: 1px solid black; padding: 2px;"></div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"></div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">145580.00</div>

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.

Thomas F. Steyer

Signature

[Electronically Filed]

Date

MM

DD

YYYY