

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Values are Vital

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		<input type="text" value="1010000.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1010000.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1102000.00"/>	<input type="text" value="1102000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="2112000.00"/>	<input type="text" value="2112000.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1985008.85"/>	<input type="text" value="1985008.85"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="126991.15"/>	<input type="text" value="126991.15"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

Write or Type Committee Name

Values are Vital

Report Covering the Period: From: 01 / 01 / 2014 To: 04 / 02 / 2014

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).....	1102000.00	1102000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1102000.00	1102000.00
(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)	1102000.00	1102000.00
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))..... ▶	1102000.00	1102000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1102000.00	1102000.00

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	64079.87	64079.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	64079.87	64079.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	813249.07	813249.07
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	1107679.91	1107679.91
(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)).....	1107679.91	1107679.91
29. Other Disbursements	0.00	0.00
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)) ..	1985008.85	1985008.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1985008.85	1985008.85

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)	1102000.00	1102000.00
34. Total Contribution Refunds (from Line 28(d))	1107679.91	1107679.91
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	-5679.91	-5679.91
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	64079.87	64079.87
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	64079.87	64079.87

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
Values are Vital

Full Name (Last, First, Middle Initial) A. Dave Brown			Date of Receipt MM / DD / YYYY 03 / 11 / 2014
Mailing Address 3577 West Gulf Drive			Transaction ID : SA11AI.4257
City Sanibel	State FL	Zip Code 33957	Amount of Each Receipt this Period 50000.00
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00		

Full Name (Last, First, Middle Initial) B. Anthony Farhat			Date of Receipt MM / DD / YYYY 01 / 03 / 2014
Mailing Address 796 Birdie View Pt			Transaction ID : SA11AI.4327
City Sanibel	State FL	Zip Code 33957	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Requested	Occupation Home Builder		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Ronald M Firman			Date of Receipt MM / DD / YYYY 01 / 13 / 2014
Mailing Address 247 SW 8th Street #301			Transaction ID : SA11AI.4328
City Miami	State FL	Zip Code 33130	Amount of Each Receipt this Period 225000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225000.00		

SUBTOTAL of Receipts This Page (optional).....▶	276000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Values are Vital

A. Ronald M Firman
 Full Name (Last, First, Middle Initial)
 Mailing Address 247 SW 8th Street #301
 City Miami State FL Zip Code 33130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **-47679.91**

Date of Receipt **02 / 10 / 2014**
Transaction ID : SA11AI.4256
 Amount of Each Receipt this Period **400000.00**

B. Ronald M Firman
 Full Name (Last, First, Middle Initial)
 Mailing Address 247 SW 8th Street #301
 City Miami State FL Zip Code 33130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **-27679.91**

Date of Receipt **03 / 13 / 2014**
Transaction ID : SA11AI.4260
 Amount of Each Receipt this Period **20000.00**

C. Ronald M Firman
 Full Name (Last, First, Middle Initial)
 Mailing Address 247 SW 8th Street #301
 City Miami State FL Zip Code 33130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **12320.09**

Date of Receipt **03 / 18 / 2014**
Transaction ID : SA11AI.4261
 Amount of Each Receipt this Period **40000.00**

SUBTOTAL of Receipts This Page (optional).....	460000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 38
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Values are Vital

Full Name (Last, First, Middle Initial) A. Ronald M Firman		Date of Receipt
Mailing Address 247 SW 8th Street #301		<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City Miami	State FL	Zip Code 33130
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.4262
Name of Employer Retired		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="10000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="22320.09"/>	

Full Name (Last, First, Middle Initial) B. Ronald M Firman		Date of Receipt
Mailing Address 247 SW 8th Street #301		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City Miami	State FL	Zip Code 33130
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.4263
Name of Employer Retired		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="15000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="37320.09"/>	

Full Name (Last, First, Middle Initial) C. Ronald M Firman		Date of Receipt
Mailing Address 247 SW 8th Street #301		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City Miami	State FL	Zip Code 33130
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.4264
Name of Employer Retired		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="140000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="177320.09"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="165000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 38
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Values are Vital

A. Ronald M Firman
Full Name (Last, First, Middle Initial)

Mailing Address 247 SW 8th Street #301

City Miami State FL Zip Code 33130

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 277320.09

Date of Receipt 03 / 28 / 2014

Transaction ID : SA11AI.4265

Amount of Each Receipt this Period 100000.00

B. Ronald M Firman
Full Name (Last, First, Middle Initial)

Mailing Address 247 SW 8th Street #301

City Miami State FL Zip Code 33130

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 377320.09

Date of Receipt 04 / 02 / 2014

Transaction ID : SA11AI.4330

Amount of Each Receipt this Period 100000.00

C. Jack Stephenson
Full Name (Last, First, Middle Initial)

Mailing Address 24420 Sandhill Blvd Ssuite 303

City Punta Gorda State FL Zip Code 33983

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

Name of Employer Requested Occupation Real Estate Developer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 19 / 2014

Transaction ID : SA11AI.4329

Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	201000.00
TOTAL This Period (last page this line number only).....▶	1102000.00

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Values are Vital

A. Axiom Strategies, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1251 NW Briarcliff Parkway
Suite 85

City Kansas City State MO Zip Code 64116

Purpose of Disbursement Polling memo and Research

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Special-Primary

Date of Disbursement: MM / DD / YYYY
02 / 18 / 2014

Transaction ID : SB21B.4252

Amount of Each Disbursement this Period: 10000.00

Category/Type

B. Axiom Strategies, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1251 NW Briarcliff Parkway
Suite 85

City Kansas City State MO Zip Code 64116

Purpose of Disbursement Research

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Special-Primary

Date of Disbursement: MM / DD / YYYY
03 / 28 / 2014

Transaction ID : SB21B.4316

Amount of Each Disbursement this Period: 10000.00

Category/Type

C. Axiom Strategies, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1251 NW Briarcliff Parkway
Suite 85

City Kansas City State MO Zip Code 64116

Purpose of Disbursement Campaign Planning

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Special-Primary

Date of Disbursement: MM / DD / YYYY
04 / 01 / 2014

Transaction ID : SB21B.4275

Amount of Each Disbursement this Period: 2367.37

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 22367.37

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

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)

Values are Vital

Full Name (Last, First, Middle Initial)

A. Wilson Perkins Allen

Mailing Address 1319 Classen Drive

City Oklahoma City State OK Zip Code 73103

Purpose of Disbursement
Opinion Research

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Special-Primary

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		14		2014

Transaction ID : SB21B.4250

Amount of Each Disbursement this Period

19995.00

Full Name (Last, First, Middle Initial)

B. Wilson Perkins Allen

Mailing Address 1319 Classen Drive

City Oklahoma City State OK Zip Code 73103

Purpose of Disbursement
Opinion Research

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Special-Primary

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		21		2014

Transaction ID : SB21B.4253

Amount of Each Disbursement this Period

12790.00

Full Name (Last, First, Middle Initial)

C. Wilson Perkins Allen

Mailing Address 1319 Classen Drive

City Oklahoma City State OK Zip Code 73103

Purpose of Disbursement
Polling

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Special-Primary

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2014

Transaction ID : SB21B.4254

Amount of Each Disbursement this Period

1470.00

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

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

34255.00

64079.87

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Values are Vital

Full Name (Last, First, Middle Initial)

A. Martin Burns

Mailing Address 9811 W Charleston Blvd
#2513

City Las Vegas State NV Zip Code 89117

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2014

Transaction ID : SB28A.4266

Amount of Each Disbursement this Period

435000.00

Full Name (Last, First, Middle Initial)

B. Ronald M Firman

Mailing Address 247 SW 8th Street
#301

City Miami State FL Zip Code 33130

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2014

Transaction ID : SB28A.4255

Amount of Each Disbursement this Period

672679.91

Full Name (Last, First, Middle Initial)

C.

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 M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

1107679.91

1107679.91

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Values are Vital
FEC IDENTIFICATION NUMBER C C00552422
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Axiom Strategies, LLC
Mailing Address 1251 NW Briarcliff Parkway Suite 85
City Kansas City State MO Zip Code 64116
Purpose of Expenditure Mailer Category/Type
Name of Federal Candidate PAIGE VANIER Vanier KREEGEL Support Oppose
Calendar Year-To-Date Per Election for Office Sought 107395.00

Date of Public Distribution/Dissemination
Amount 28500.00
Transaction ID : SE.4106
Date of Disbursement or Obligation 02 / 25 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

Full Name of Payee Axiom Strategies, LLC
Mailing Address 1251 NW Briarcliff Parkway Suite 85
City Kansas City State MO Zip Code 64116
Purpose of Expenditure Mailer Category/Type 001
Name of Federal Candidate PAIGE VANIER Vanier KREEGEL Support Oppose
Calendar Year-To-Date Per Election for Office Sought 135895.00

Date of Public Distribution/Dissemination
Amount 28500.00
Transaction ID : SE.4109
Date of Disbursement or Obligation 02 / 25 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

(a) SUBTOTAL of Itemized Independent Expenditures 57000.00
(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.

Ronald M Firman [Electronically Filed] Date 04 / 10 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Values are Vital
FEC IDENTIFICATION NUMBER C C00552422
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Axiom Strategies, LLC
Mailing Address 1251 NW Briarcliff Parkway Suite 85
City Kansas City State MO Zip Code 64116
Purpose of Expenditure TV and radio Category/Type 004
Name of Federal Candidate PAIGE VANIER Vanier KREEGEL
Calendar Year-To-Date Per Election for Office Sought 211886.00

Date of Public Distribution/Dissemination
Amount 75991.00
Transaction ID : SE.4110
Date of Disbursement or Obligation 03 / 04 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

Full Name of Payee Axiom Strategies, LLC
Mailing Address 1251 NW Briarcliff Parkway Suite 85
City Kansas City State MO Zip Code 64116
Purpose of Expenditure Mailer Category/Type 004
Name of Federal Candidate LIZBETH BENACQUISTO
Calendar Year-To-Date Per Election for Office Sought 239886.00

Date of Public Distribution/Dissemination
Amount 28000.00
Transaction ID : SE.4112
Date of Disbursement or Obligation 03 / 04 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

(a) SUBTOTAL of Itemized Independent Expenditures 103991.00
(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.

Ronald M Firman [Electronically Filed] Date 04 / 10 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Values are Vital
FEC IDENTIFICATION NUMBER C C00552422
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Axiom Strategies, LLC
Mailing Address 1251 NW Briarcliff Parkway Suite 85
City Kansas City State MO Zip Code 64116
Purpose of Expenditure Mailer Category/Type
Name of Federal Candidate PAIGE VANIER Vanier KREEGEL
Calendar Year-To-Date Per Election for Office Sought 294984.00

Date of Public Distribution/Dissemination
Amount 28323.00
Transaction ID : SE.4141
Date of Disbursement or Obligation 03 / 10 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

Full Name of Payee Axiom Strategies, LLC
Mailing Address 1251 NW Briarcliff Parkway Suite 85
City Kansas City State MO Zip Code 64116
Purpose of Expenditure Mailer #5 Category/Type
Name of Federal Candidate LIZBETH BENACQUISTO
Calendar Year-To-Date Per Election for Office Sought 323307.00

Date of Public Distribution/Dissemination
Amount 28323.00
Transaction ID : SE.4145
Date of Disbursement or Obligation 03 / 12 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 56646.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ronald M Firman [Electronically Filed] Date 04 / 10 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Values are Vital
FEC IDENTIFICATION NUMBER C C00552422
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Axiom Strategies, LLC
Mailing Address 1251 NW Briarcliff Parkway Suite 85
City Kansas City State MO Zip Code 64116
Purpose of Expenditure Mailer #6 Category/Type 004
Name of Federal Candidate CURTIS J CLAWSON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 351630.00

Date of Public Distribution/Dissemination
Amount 28323.00
Transaction ID : SE.4146
Date of Disbursement or Obligation 03 / 12 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

Full Name of Payee Axiom Strategies, LLC
Mailing Address 1251 NW Briarcliff Parkway Suite 85
City Kansas City State MO Zip Code 64116
Purpose of Expenditure Small Bix Mailer Absentee Additions Category/Type 004
Name of Federal Candidate PAIGE VANIER Vanier KREEGEL Support Oppose
Calendar Year-To-Date Per Election for Office Sought 488904.00

Date of Public Distribution/Dissemination
Amount 2904.00
Transaction ID : SE.4186
Date of Disbursement or Obligation 03 / 17 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

(a) SUBTOTAL of Itemized Independent Expenditures 31227.00
(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.
Ronald M Firman [Electronically Filed] Date 04 / 10 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Values are Vital
FEC IDENTIFICATION NUMBER C C00552422
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Axiom Strategies, LLC
Mailing Address 1251 NW Briarcliff Parkway Suite 85
City Kansas City State MO Zip Code 64116
Purpose of Expenditure Mailer Category/Type 004
Name of Federal Candidate CURTIS J CLAWSON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 492145.00

Date of Public Distribution/Dissemination
Amount 3241.00
Transaction ID : SE.4187
Date of Disbursement or Obligation 03 / 17 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

Full Name of Payee Axiom Strategies, LLC
Mailing Address 1251 NW Briarcliff Parkway Suite 85
City Kansas City State MO Zip Code 64116
Purpose of Expenditure Ethics Violation Mailer Category/Type 004
Name of Federal Candidate LIZBETH BENACQUISTO Support Oppose
Calendar Year-To-Date Per Election for Office Sought 495294.00

Date of Public Distribution/Dissemination
Amount 3149.00
Transaction ID : SE.4188
Date of Disbursement or Obligation 03 / 17 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

(a) SUBTOTAL of Itemized Independent Expenditures 6390.00
(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.

Ronald M Firman [Electronically Filed] Date 04 / 10 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Values are Vital	FEC IDENTIFICATION NUMBER ▼ C C00552422
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 of Payee Axiom Strategies, LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address 1251 NW Briarcliff Parkway Suite 85	Amount 163.83
City Kansas City	State MO
Zip Code 64116	Transaction ID : SE.4191
Purpose of Expenditure Mailer	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 17 / 2014
Category/ Type 004	Name of Federal Candidate PAIGE VANIER Vanier KREEGEL
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Special-Primary
506195.07	

Full Name of Payee Axiom Strategies, LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address 1251 NW Briarcliff Parkway Suite 85	Amount 10521.34
City Kansas City	State MO
Zip Code 64116	Transaction ID : SE.4192
Purpose of Expenditure Mailer #8	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 17 / 2014
Category/ Type 004	Name of Federal Candidate PAIGE VANIER Vanier KREEGEL
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Special-Primary
516716.41	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	10685.17
(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.

Ronald M Firman
Signature

[Electronically Filed]

Date 04 / 10 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Values are Vital
FEC IDENTIFICATION NUMBER C C00552422
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Axiom Strategies, LLC
Mailing Address 1251 NW Briarcliff Parkway Suite 85
City Kansas City State MO Zip Code 64116
Purpose of Expenditure Mailer #8 Category/Type 004
Name of Federal Candidate LIZBETH BENACQUISTO Support Oppose
Calendar Year-To-Date Per Election for Office Sought 527237.74

Date of Public Distribution/Dissemination
Amount 10521.33
Transaction ID : SE.4193
Date of Disbursement or Obligation 03 / 17 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

Full Name of Payee Axiom Strategies, LLC
Mailing Address 1251 NW Briarcliff Parkway Suite 85
City Kansas City State MO Zip Code 64116
Purpose of Expenditure Mailer #8 Category/Type 004
Name of Federal Candidate CURTIS J CLAWSON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 537759.07

Date of Public Distribution/Dissemination
Amount 10521.33
Transaction ID : SE.4194
Date of Disbursement or Obligation 03 / 17 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

(a) SUBTOTAL of Itemized Independent Expenditures 21042.66
(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.

Ronald M Firman [Electronically Filed] Date 04 / 10 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Values are Vital
FEC IDENTIFICATION NUMBER C C00552422
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Axiom Strategies, LLC
Mailing Address 1251 NW Briarcliff Parkway Suite 85
City Kansas City State MO Zip Code 64116
Purpose of Expenditure Phone Calls Category/Type 005
Name of Federal Candidate PAIGE VANIER Vanier KREEGEL
Support [X] Oppose []
Calendar Year-To-Date Per Election for Office Sought 783314.07

Date of Public Distribution/Dissemination
Amount 1184.00
Transaction ID : SE.4272
Date of Disbursement or Obligation 04 / 01 / 2014
Office Sought: [X] House District: 19
[] President [] Senate State: FL
Disbursement For: [] Primary [] General
[X] Other (specify) Special-Primary

Full Name of Payee Axiom Strategies, LLC
Mailing Address 1251 NW Briarcliff Parkway Suite 85
City Kansas City State MO Zip Code 64116
Purpose of Expenditure Mailer Category/Type 004
Name of Federal Candidate LIZBETH BENACQUISTO
Support [] Oppose [X]
Calendar Year-To-Date Per Election for Office Sought 798281.57

Date of Public Distribution/Dissemination
Amount 14967.50
Transaction ID : SE.4273
Date of Disbursement or Obligation 04 / 01 / 2014
Office Sought: [X] House District: 19
[] President [] Senate State: FL
Disbursement For: [] Primary [] General
[X] Other (specify) Special-Primary

(a) SUBTOTAL of Itemized Independent Expenditures 16151.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Ronald M Firman [Electronically Filed] Date 04 / 10 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Values are Vital
FEC IDENTIFICATION NUMBER C C00552422
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Axiom Strategies, LLC
Mailing Address 1251 NW Briarcliff Parkway Suite 85
City Kansas City State MO Zip Code 64116
Purpose of Expenditure Mailer Category/Type 004
Name of Federal Candidate CURTIS J CLAWSON
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 813249.07

Date of Public Distribution/Dissemination
Amount 14967.50
Transaction ID : SE.4274
Date of Disbursement or Obligation 04 / 01 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

Full Name of Payee Jamestown Associates
Mailing Address 5 Mapleton Road Suite 300
City Princeton State NJ Zip Code 08540
Purpose of Expenditure Media Production Category/Type 004
Name of Federal Candidate PAIGE VANIER Vanier KREEGEL
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 266661.00

Date of Public Distribution/Dissemination
Amount 8775.00
Transaction ID : SE.4136
Date of Disbursement or Obligation 03 / 07 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

(a) SUBTOTAL of Itemized Independent Expenditures 23742.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Ronald M Firman [Electronically Filed] Date 04 / 10 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Values are Vital
FEC IDENTIFICATION NUMBER C C00552422
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Jamestown Associates
Mailing Address 5 Mapleton Road Suite 300
City Princeton State NJ Zip Code 08540
Purpose of Expenditure TV Category/Type 004
Name of Federal Candidate PAIGE VANIER Vanier KREEGEL
Calendar Year-To-Date Per Election for Office Sought 376175.00

Date of Public Distribution/Dissemination
Amount 24545.00
Transaction ID : SE.4155
Date of Disbursement or Obligation 03 / 12 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

Full Name of Payee Jamestown Associates
Mailing Address 5 Mapleton Road Suite 300
City Princeton State NJ Zip Code 08540
Purpose of Expenditure TV Category/Type 004
Name of Federal Candidate PAIGE VANIER Vanier KREEGEL
Calendar Year-To-Date Per Election for Office Sought 468610.00

Date of Public Distribution/Dissemination
Amount 92435.00
Transaction ID : SE.4156
Date of Disbursement or Obligation 03 / 12 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

(a) SUBTOTAL of Itemized Independent Expenditures 116980.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Ronald M Firman [Electronically Filed] Date 04 / 10 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Values are Vital
FEC IDENTIFICATION NUMBER C C00552422
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Jamestown Associates
Mailing Address 5 Mapleton Road Suite 300
City Princeton State NJ Zip Code 08540
Purpose of Expenditure TV Category/Type
Date of Public Distribution/Dissemination 03/17/2014
Amount 17390.00
Transaction ID : SE.4173
Date of Disbursement or Obligation 03/14/2014
Name of Federal Candidate PAIGE VANIER Vanier KREEGEL
Support Oppose
Office Sought: House District: 19 State: FL
Calendar Year-To-Date Per Election for Office Sought 486000.00
Disbursement For: Other (specify) Special-Primary

Full Name of Payee Jamestown Associates
Mailing Address 5 Mapleton Road Suite 300
City Princeton State NJ Zip Code 08540
Purpose of Expenditure TV ad Buy Category/Type 004
Date of Public Distribution/Dissemination
Amount 3333.34
Transaction ID : SE.4205
Date of Disbursement or Obligation 03/18/2014
Name of Federal Candidate PAIGE VANIER Vanier KREEGEL
Support Oppose
Office Sought: House District: 19 State: FL
Calendar Year-To-Date Per Election for Office Sought 541092.41
Disbursement For: Other (specify) Special-Primary

(a) SUBTOTAL of Itemized Independent Expenditures 20723.34
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Ronald M Firman [Electronically Filed] Date 04/10/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Values are Vital
FEC IDENTIFICATION NUMBER C C00552422
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Jamestown Associates
Mailing Address 5 Mapleton Road Suite 300
City Princeton State NJ Zip Code 08540
Purpose of Expenditure TV Ad Buy Category/Type 004
Name of Federal Candidate LIZBETH BENACQUISTO
Calendar Year-To-Date Per Election for Office Sought 544425.74

Date of Public Distribution/Dissemination
Amount 3333.33
Transaction ID : SE.4206
Date of Disbursement or Obligation 03 / 18 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

Full Name of Payee Jamestown Associates
Mailing Address 5 Mapleton Road Suite 300
City Princeton State NJ Zip Code 08540
Purpose of Expenditure TV Ad buy Category/Type 004
Name of Federal Candidate CURTIS J CLAWSON
Calendar Year-To-Date Per Election for Office Sought 547759.07

Date of Public Distribution/Dissemination
Amount 3333.33
Transaction ID : SE.4207
Date of Disbursement or Obligation 03 / 18 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

(a) SUBTOTAL of Itemized Independent Expenditures 6666.66
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Ronald M Firman [Electronically Filed] Date 04 / 10 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Values are Vital
FEC IDENTIFICATION NUMBER C C00552422
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Jamestown Associates
Mailing Address 5 Mapleton Road Suite 300
City Princeton State NJ Zip Code 08540
Purpose of Expenditure Tv ad production Category/Type 004
Name of Federal Candidate PAIGE VANIER Vanier KREEGEL
Calendar Year-To-Date Per Election for Office Sought 550398.07

Date of Public Distribution/Dissemination
Amount 2639.00
Transaction ID : SE.4208
Date of Disbursement or Obligation 03 / 18 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

Full Name of Payee Jamestown Associates
Mailing Address 5 Mapleton Road Suite 300
City Princeton State NJ Zip Code 08540
Purpose of Expenditure TV ad production Category/Type 004
Name of Federal Candidate LIZBETH BENACQUISTO
Calendar Year-To-Date Per Election for Office Sought 553037.07

Date of Public Distribution/Dissemination
Amount 2639.00
Transaction ID : SE.4209
Date of Disbursement or Obligation 03 / 18 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

(a) SUBTOTAL of Itemized Independent Expenditures 5278.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Ronald M Firman [Electronically Filed] Date 04 / 10 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Values are Vital
FEC IDENTIFICATION NUMBER C C00552422
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Jamestown Associates
Mailing Address 5 Mapleton Road Suite 300
City Princeton State NJ Zip Code 08540
Purpose of Expenditure TV ad production Category/Type 004
Name of Federal Candidate CURTIS J CLAWSON
Calendar Year-To-Date Per Election for Office Sought 555676.07

Date of Public Distribution/Dissemination
Amount 2639.00
Transaction ID : SE.4210
Date of Disbursement or Obligation 03 / 18 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

Full Name of Payee Jamestown Associates
Mailing Address 5 Mapleton Road Suite 300
City Princeton State NJ Zip Code 08540
Purpose of Expenditure TV ad buy Category/Type 004
Name of Federal Candidate PAIGE VANIER Vanier KREEGEL
Calendar Year-To-Date Per Election for Office Sought 565842.75

Date of Public Distribution/Dissemination
Amount 10166.68
Transaction ID : SE.4218
Date of Disbursement or Obligation 03 / 20 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

(a) SUBTOTAL of Itemized Independent Expenditures 12805.68
(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.

Ronald M Firman [Electronically Filed] Date 04 / 10 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Values are Vital	FEC IDENTIFICATION NUMBER ▼ C C00552422
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 of Payee Jamestown Associates	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address 5 Mapleton Road Suite 300	Amount 7893.34
City State Zip Code Princeton NJ 08540	Transaction ID : SE.4225 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 25 / 2014
Purpose of Expenditure 1/3 of TV Buy	Category/Type 004
Name of Federal Candidate PAIGE VANIER Vanier KREEGEL	Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u> <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 594069.41	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Special-Primary</u>

Full Name of Payee Jamestown Associates	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address 5 Mapleton Road Suite 300	Amount 7893.33
City State Zip Code Princeton NJ 08540	Transaction ID : SE.4226 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 25 / 2014
Purpose of Expenditure 1/3 of TV Buy	Category/Type 004
Name of Federal Candidate LIZBETH BENACQUISTO	Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 601962.74	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Special-Primary</u>

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	15786.67
(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.

Ronald M Firman

Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 10 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Values are Vital
FEC IDENTIFICATION NUMBER C C00552422
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Jamestown Associates
Mailing Address 5 Mapleton Road Suite 300
City Princeton State NJ Zip Code 08540
Purpose of Expenditure 1/3 of TV Buy Category/Type 004
Name of Federal Candidate CURTIS J CLAWSON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 609856.07

Date of Public Distribution/Dissemination
Amount 7893.33
Transaction ID : SE.4227
Date of Disbursement or Obligation 03 / 25 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

Full Name of Payee Jamestown Associates
Mailing Address 5 Mapleton Road Suite 300
City Princeton State NJ Zip Code 08540
Purpose of Expenditure TV Buy Category/Type 004
Name of Federal Candidate CURTIS J CLAWSON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 727630.07

Date of Public Distribution/Dissemination
Amount 117774.00
Transaction ID : SE.4232
Date of Disbursement or Obligation 03 / 27 / 2014
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

(a) SUBTOTAL of Itemized Independent Expenditures 125667.33
(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.

Ronald M Firman [Electronically Filed] Date 04 / 10 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Values are Vital	FEC IDENTIFICATION NUMBER ▼ C C00552422
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 of Payee Jamestown Associates	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address 5 Mapleton Road Suite 300	Amount 2226.00
City State Zip Code Princeton NJ 08540	Transaction ID : SE.4233 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 27 / 2014
Purpose of Expenditure Radio Buy	Category/Type 004
Name of Federal Candidate CURTIS J CLAWSON	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 729856.07	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Special-Primary

Full Name of Payee Jamestown Associates	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address 5 Mapleton Road Suite 300	Amount 15699.50
City State Zip Code Princeton NJ 08540	Transaction ID : SE.4234 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 28 / 2014
Purpose of Expenditure Radio Buy	Category/Type 004
Name of Federal Candidate PAIGE VANIER Vanier KREEGEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 745555.57	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Special-Primary

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	17925.50
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Ronald M Firman
Signature

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y
04 / 10 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Values are Vital
FEC IDENTIFICATION NUMBER C C00552422
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Jamestown Associates
Mailing Address 5 Mapleton Road Suite 300
City Princeton State NJ Zip Code 08540
Purpose of Expenditure Radio Buy Category/Type 004
Date of Public Distribution/Dissemination
Amount 15699.50
Transaction ID : SE.4235
Date of Disbursement or Obligation 03 / 28 / 2014
Name of Federal Candidate CURTIS J CLAWSON
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

Full Name of Payee Jamestown Associates
Mailing Address 5 Mapleton Road Suite 300
City Princeton State NJ Zip Code 08540
Purpose of Expenditure TV Buy Category/Type 004
Date of Public Distribution/Dissemination
Amount 9125.00
Transaction ID : SE.4270
Date of Disbursement or Obligation 04 / 01 / 2014
Name of Federal Candidate CURTIS J CLAWSON
Office Sought: House District: 19 State: FL
Disbursement For: Other (specify) Special-Primary

(a) SUBTOTAL of Itemized Independent Expenditures 24824.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Ronald M Firman [Electronically Filed] Date 04 / 10 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Values are Vital
FEC IDENTIFICATION NUMBER C C00552422
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Jamestown Associates
Mailing Address 5 Mapleton Road Suite 300
City Princeton State NJ Zip Code 08540
Purpose of Expenditure Radio Buy Category/Type 004

Date of Public Distribution/Dissemination
Amount 1750.00
Transaction ID : SE.4271
Date of Disbursement or Obligation 04 / 01 / 2014

Name of Federal Candidate CURTIS J CLAWSON
Support Oppose
Office Sought: House District: 19
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 782130.07

Disbursement For: Primary General 2014
Other (specify) Special-Primary

Full Name of Payee Morado & Associates, LLC
Mailing Address 1217 E Cape Coral Parkway PMB #160
City Cape Coral State FL Zip Code 33904
Purpose of Expenditure Digital Media Services Category/Type 004

Date of Public Distribution/Dissemination
Amount 18000.00
Transaction ID : SE.4134
Date of Disbursement or Obligation 03 / 07 / 2014

Name of Federal Candidate PAIGE VANIER Vanier KREEGEL
Support Oppose
Office Sought: House District: 19
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 257886.00

Disbursement For: Primary General 2014
Other (specify) Special-Primary

(a) SUBTOTAL of Itemized Independent Expenditures 19750.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Values are Vital	FEC IDENTIFICATION NUMBER ▼ C C00552422
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 of Payee Morado & Associates, LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address 1217 E Cape Coral Parkway PMB #160	Amount 3333.33
City State Zip Code Cape Coral FL 33904	Transaction ID : SE.4238 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 28 / 2014
Purpose of Expenditure Internet Buy	Category/Type 004
Name of Federal Candidate LIZBETH BENACQUISTO	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought 767921.74	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) <u>Special-Primary</u>

Full Name of Payee Morado & Associates, LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address 1217 E Cape Coral Parkway PMB #160	Amount 3333.33
City State Zip Code Cape Coral FL 33904	Transaction ID : SE.4239 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 28 / 2014
Purpose of Expenditure Internet Buy	Category/Type 004
Name of Federal Candidate CURTIS J CLAWSON	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought 771255.07	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) <u>Special-Primary</u>

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	6666.66
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Ronald M Firman

Signature [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 10 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Values are Vital
FEC IDENTIFICATION NUMBER C C00552422
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Morado & Associates LLC
Mailing Address 1217 E Cape Coral Parkway PMB 160
City Cape Coral State FL Zip Code 33904
Purpose of Expenditure Internet Buy Category/Type 004
Date of Public Distribution/Dissemination
Amount 3333.34
Transaction ID : SE.4236
Date of Disbursement or Obligation 03 / 28 / 2014
Name of Federal Candidate PAIGE VANIER Vanier KREEGEL
Support Oppose
Office Sought: House District: 19
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 764588.41
Disbursement For: Other (specify) Special-Primary

Full Name of Payee Southern Campaign Resources
Mailing Address 235 East Virginia Street
City Tallahassee State FL Zip Code 32301
Purpose of Expenditure TV Ad Buy Category/Type 004
Date of Public Distribution/Dissemination
Amount 15230.00
Transaction ID : SE.4125
Date of Disbursement or Obligation 01 / 21 / 2014
Name of Federal Candidate PAIGE VANIER Vanier KREEGEL
Support Oppose
Office Sought: House District: 19
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 15230.00
Disbursement For: Other (specify) Special-Primary

(a) SUBTOTAL of Itemized Independent Expenditures 18563.34
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Ronald M Firman [Electronically Filed] Date 04 / 10 / 2014
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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Values are Vital	FEC IDENTIFICATION NUMBER ▼ C C00552422
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 of Payee Southern Campaign Resources		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address 235 East Virginia Street		Amount 3495.00	
City Tallahassee	State FL	Zip Code 32301	Transaction ID : SE.4127
Purpose of Expenditure TV Ad Production	Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 01 / 21 / 2014	
Name of Federal Candidate PAIGE VANIER Vanier KREEGEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought 18725.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Special-Primary</u>	

Full Name of Payee Southern Campaign Resources		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address 235 East Virginia Street		Amount 18870.00	
City Tallahassee	State FL	Zip Code 32301	Transaction ID : SE.4128
Purpose of Expenditure TV Ad buy	Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 01 / 27 / 2014	
Name of Federal Candidate PAIGE VANIER Vanier KREEGEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought 37595.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Special-Primary</u>	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	22365.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Ronald M Firman
Signature

[Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 10 / 2014

