

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.
Foundation for a Greater America INC

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 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) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

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 Mr. James P Hodgins

Signature of Treasurer Mr. James P Hodgins [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Foundation for a Greater America INC

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="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="157143.43"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="204171.87"/>	<input type="text" value="250424.50"/>
(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="361315.30"/>	<input type="text" value="250424.50"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="251881.76"/>	<input type="text" value="297791.91"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="109433.54"/>	<input type="text" value="-47367.41"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="164913.34"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="295820.83"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Foundation for a Greater America INC

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

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).....	1200.00	19213.11
(ii) Unitemized	2571.87	12890.29
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3771.87	32103.40
(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)	3771.87	32103.40
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	200400.00	218320.00
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	1.10
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))..... ▶	204171.87	250424.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	204171.87	250424.50

DETAILED SUMMARY PAGE
of Disbursements

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	18703.42	62863.41
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	18703.42	62863.41
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)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	67865.00	68870.00
27. Loans Made.....	164913.34	164913.34
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	400.00	1145.16
(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)).....	400.00	1145.16
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)) ..	251881.76	297791.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	251881.76	297791.91

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)	3771.87	32103.40
34. Total Contribution Refunds (from Line 28(d))	400.00	1145.16
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3371.87	30958.24
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	18703.42	62863.41
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	18703.42	62863.41

**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 56
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 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)
Foundation for a Greater America INC

A. norma Grill
Full Name (Last, First, Middle Initial)

Mailing Address 65 Bristol Dr

City Boynton Beach State FL Zip Code 33436-7410

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

Name of Employer retired Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
11 / 04 / 2014
Transaction ID : A7304D532E52445C598C

Amount of Each Receipt this Period
1000.00

B. pamela atkinson
Full Name (Last, First, Middle Initial)

Mailing Address 217 oak springs dr.

City San Anselmo State CA Zip Code 94960-1326

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

Name of Employer self employed Occupation jewery designer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 21 / 2014
Transaction ID : AA7A0E227A6BD4B708F8

Amount of Each Receipt this Period
100.00

C. pamela atkinson
Full Name (Last, First, Middle Initial)

Mailing Address 217 oak springs dr.

City San Anselmo State CA Zip Code 94960-1326

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

Name of Employer self employed Occupation jewery designer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 21 / 2014
Transaction ID : A962302B5CC8C48E19DF

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	1200.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 56
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Foundation for a Greater America INC

Full Name (Last, First, Middle Initial)
A. Mary E Coons

Mailing Address 1155 Prospect Ave

City State Zip Code
Hartford CT 06105-1128

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

Name of Employer Occupation
student Housewife

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200000.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 14 / 2014
Transaction ID : AF90F359E3C6E488384D

Amount of Each Receipt this Period
200000.00

to help fund operations

Full Name (Last, First, Middle Initial)
B.

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

Amount of Each Receipt this Period

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ▶ 200000.00

TOTAL This Period (last page this line number only)..... ▶ 200000.00

**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)
Foundation for a Greater America INC

Full Name (Last, First, Middle Initial)

A. Target

Mailing Address 3030 Harbor Blvd

City State Zip Code
Costa Mesa CA 92626-2562

Purpose of Disbursement
Office supplies - ink for printing voters for hillary campaign documents

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			20			2014			

Transaction ID : B63BC15B5A01747CDBD3

Amount of Each Disbursement this Period

53.99

Full Name (Last, First, Middle Initial)

B. United States Post Office (USPS)

Mailing Address 3101 West Sunflower

City State Zip Code
Santa Ana CA 92799-0101

Purpose of Disbursement
mailing exp - postage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			21			2014			

Transaction ID : BB6D243ABA84147E1837

Amount of Each Disbursement this Period

31.50

Full Name (Last, First, Middle Initial)

C. Microsoft Office 365

Mailing Address One Microsoft Way

City State Zip Code
Redmond WA 98052-8300

Purpose of Disbursement
software for word and excel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			03			2014			

Transaction ID : B23F9667ED3984326896

Amount of Each Disbursement this Period

140.00

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

225.49

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

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**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)
Foundation for a Greater America INC

Full Name (Last, First, Middle Initial)

A. Target

Mailing Address 3030 Harbor Blvd

City State Zip Code
Costa Mesa CA 92626-2562

Purpose of Disbursement
misc ofc supplies for operations - clips, pens, sticky notes

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2014			

Transaction ID : B3D8EEC419B9F47CFA34

Amount of Each Disbursement this Period

22.67

Full Name (Last, First, Middle Initial)

B. United States Post Office (USPS)

Mailing Address 3101 West Sunflower

City State Zip Code
Santa Ana CA 92799-0101

Purpose of Disbursement
mailing expense - postage

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2014			

Transaction ID : B0373179B472A450095C

Amount of Each Disbursement this Period

19.60

Full Name (Last, First, Middle Initial)

C. TransFirst, LLC

Mailing Address 3131 South Vaughn Way
Suite 350

City State Zip Code
Aurora CO 80014-3503

Purpose of Disbursement
merchant bank processing

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			12			2014			

Transaction ID : BE5301BDE068447DC968

Amount of Each Disbursement this Period

36.12

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

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

78.39

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**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)
Foundation for a Greater America INC

Full Name (Last, First, Middle Initial)

A. TransFirst, LLC

Mailing Address 3131 South Vaughn Way
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement
merchant bank processing fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 12 / 2014

Transaction ID : **BFAD22918D1234B0C92E**

Amount of Each Disbursement this Period

107.91

Full Name (Last, First, Middle Initial)

B. TransFirst, LLC

Mailing Address 3131 South Vaughn Way
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement
merchant bank processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 12 / 2014

Transaction ID : **B218017647DDA47A498F**

Amount of Each Disbursement this Period

0.73

Full Name (Last, First, Middle Initial)

C. TransFirst, LLC

Mailing Address 3131 South Vaughn Way
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement
merchant bank processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 12 / 2014

Transaction ID : **BB9724A98B03640349F5**

Amount of Each Disbursement this Period

44.18

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

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

152.82

**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)
Foundation for a Greater America INC

Full Name (Last, First, Middle Initial)

A. Mr. James P Hodgins

Mailing Address PO Box 3587

City Tustin State CA Zip Code 92781-3587

Purpose of Disbursement partial payment versus accrued Board approved Consulting Contract for ~~treasurer services~~
Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			17			2014			

Transaction ID : B2EC4378CE47A4A5D904

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. CrossClick Media, Inc. I (CCM)

Mailing Address 8725 S. Eastern Ave
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement partial pay on debt of 11/13/14 \$14,003.50 - bal due \$11,078.21
Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2014			

Transaction ID : BD784FCFAE314413AA5A

Amount of Each Disbursement this Period

2925.29

Full Name (Last, First, Middle Initial)

C. Mr. Milton C Ault III

Mailing Address PO Box 3587

City Tustin State CA Zip Code 92781-3587

Purpose of Disbursement repay exp report of 11/19 \$595.13 - Strategic Planning Consulting
Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			21			2014			

Transaction ID : B4EFF68337C4A49B6947

Amount of Each Disbursement this Period

595.13

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

3620.42

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

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**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)
Foundation for a Greater America INC

Full Name (Last, First, Middle Initial)

A. Hemingway Lounge

Mailing Address 500 Anton Blvd

City State Zip Code
Costa Mesa CA 92626-1911

Purpose of Disbursement
drinks - Milton Ault & John Cowan - discussed John's role w/Robert Kaplan
and his investigation of K
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	2		2	0	1	4

Transaction ID : **BB4A1494BB4A54413A3F**

Amount of Each Disbursement this Period

2	3	.	2	8
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[MEMO ITEM]

drinks - Milton Ault & John Cowan - discussed John's role w/Robert Kaplan and his investigation of K

Full Name (Last, First, Middle Initial)

B. Houstons

Mailing Address

City State Zip Code
Irvine CA 92612

Purpose of Disbursement
Meal - JimHodgins, Milton Ault, Robert Kaplan, John Cowan - discussed
terms for hiring Rob Kaplan as
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	1	4

Transaction ID : **B68605389E9F8488883C**

Amount of Each Disbursement this Period

2	1	3	.	1	2
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[MEMO ITEM]

Meal - JimHodgins, Milton Ault, Robert Kaplan, John Cowan - discussed terms for hiring Rob Kaplan as

Full Name (Last, First, Middle Initial)

C. Hemingway Lounge

Mailing Address 500 Anton Blvd

City State Zip Code
Costa Mesa CA 92626-1911

Purpose of Disbursement
Meal - Milton Ault, John Cowan - further discussions about Kaplan and his
contract demands
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	1	4

Transaction ID : **B48F8261023BE4E77992**

Amount of Each Disbursement this Period

5	1	.	0	4
---	---	---	---	---

[MEMO ITEM]

Meal - Milton Ault, John Cowan - further discussions about Kaplan and his contract demands

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

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

0	0	.	0	0
---	---	---	---	---

0	0	.	0	0
---	---	---	---	---

**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)
Foundation for a Greater America INC

Full Name (Last, First, Middle Initial)

A. Fig Restaurant

Mailing Address 101 Wilshire Blvd

City Santa Monica State CA Zip Code 90401-1106

Purpose of Disbursement
Meal - Milton Ault & Rob Kaplan - discussed his contract and his role

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	1	4

Transaction ID : B2253F8A6C6B140FC975

Amount of Each Disbursement this Period

7	6	.	0	6
---	---	---	---	---

[MEMO ITEM]

Meal - Milton Ault & Rob Kaplan - discussed his contract and his role

Full Name (Last, First, Middle Initial)

B. Claim Jumper Restaurant

Mailing Address 18050 Brookhurst

City Fountain Valley State CA Zip Code 92708-6739

Purpose of Disbursement
meal - Milton Ault, Scott Plantinga, John Cowan, Robert Kaplan - discussed Propel Mgmt (scott) and C

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	1	4

Transaction ID : BBFB5D27EC0B441168A7

Amount of Each Disbursement this Period

6	9	.	4	0
---	---	---	---	---

[MEMO ITEM]

meal - Milton Ault, Scott Plantinga, John Cowan, Robert Kaplan - discussed Propel Mgmt (scott) and C

Full Name (Last, First, Middle Initial)

C. Fig Restaurant

Mailing Address 101 Wilshire Blvd

City Santa Monica State CA Zip Code 90401-1106

Purpose of Disbursement
Meal - Milton Ault, Robert Kaplan and Dege Coutee - closing deal to hire him as campaign manager

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	2		2	0	1	4

Transaction ID : B65BBAF78C8244106ADD

Amount of Each Disbursement this Period

1	1	.	6	9	1
---	---	---	---	---	---

[MEMO ITEM]

Meal - Milton Ault, Robert Kaplan and Dege Coutee - closing deal to hire him as campaign manager

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

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

0	0	.	0	0
---	---	---	---	---

0	0	.	0	0
---	---	---	---	---

**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)
Foundation for a Greater America INC

Full Name (Last, First, Middle Initial)

A. Du-par's

Mailing Address 6333 West 3rd Street

City Los Angeles State CA Zip Code 90036-3109

Purpose of Disbursement Meal - Milton Ault and Dege Coutee - discussed her possible role at FFAGA

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
03	/	29	/	2014

Transaction ID : BC9FCA9F3507A430C8FD

Amount of Each Disbursement this Period

45.32

[MEMO ITEM]

Meal - Milton Ault and Dege Coutee - discussed her possible role at FFAGA

Full Name (Last, First, Middle Initial)

B. Mr. Milton C Ault III

Mailing Address PO Box 3587

City Tustin State CA Zip Code 92781-3587

Purpose of Disbursement partial repay of debt related to Strategic Planning Consulting

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
11	/	21	/	2014

Transaction ID : B8D1CA83C8C304AA09E8

Amount of Each Disbursement this Period

290.50

Full Name (Last, First, Middle Initial)

C. Mr. James P Hodgins

Mailing Address PO Box 3587

City Tustin State CA Zip Code 92781-3587

Purpose of Disbursement partial payment versus accrued May 1, 2014 \$1,500 Board approved Consulting Contract for treasurer se

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
11	/	12	/	2014

Transaction ID : B08D23EEDFA9A4585917

Amount of Each Disbursement this Period

100.00

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

390.50

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

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**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)
Foundation for a Greater America INC

Full Name (Last, First, Middle Initial)

A. (2) Finiks Capital, LLC

Mailing Address 28 Holly Lane

City Darien State CT Zip Code 06820-3303

Purpose of Disbursement
interest pay off on \$6,500 loan from 3/17/14

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
11		17		2014

Transaction ID : B70857FDE3B1F49B88E5

Amount of Each Disbursement this Period

419.23

Full Name (Last, First, Middle Initial)

B. CrossClick Media, Inc. I (CCM)

Mailing Address 8725 S. Eastern Ave
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement
completes payment on debt from 11/10/14 of \$3,805.33

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
11		20		2014

Transaction ID : B7E4490B5DA9E47D2955

Amount of Each Disbursement this Period

174.71

Full Name (Last, First, Middle Initial)

C. Mr. Milton C Ault III

Mailing Address PO Box 3587

City Tustin State CA Zip Code 92781-3587

Purpose of Disbursement
partial repay of debt related to Strategic Planning Consulting

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
11		14		2014

Transaction ID : BA46A0A81D762481B96C

Amount of Each Disbursement this Period

409.06

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

1003.00

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

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**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)
Foundation for a Greater America INC

Full Name (Last, First, Middle Initial)

A. (2) Finiks Capital, LLC

Mailing Address 28 Holly Lane

City Darien State CT Zip Code 06820-3303

Purpose of Disbursement
final pay on interest for loan of \$500 dtd 8/20/14

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			17			2014			

Transaction ID : B1029D48A80ED4084B5A

Amount of Each Disbursement this Period

12.43

Full Name (Last, First, Middle Initial)

B. CrossClick Media, Inc. I (CCM)

Mailing Address 8725 S. Eastern Ave
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement
partial repayment of debt

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2014			

Transaction ID : BA107B059A5EA432B9A5

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

C. CrossClick Media, Inc. I (CCM)

Mailing Address 8725 S. Eastern Ave
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement
paid on account

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2014			

Transaction ID : B99B47A8BCB92426C810

Amount of Each Disbursement this Period

500.00

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

712.43

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

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**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)
Foundation for a Greater America INC

Full Name (Last, First, Middle Initial)

A. CrossClick Media, Inc. I (CCM)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

Mailing Address 8725 S. Eastern Ave
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement
paid on account

Candidate Name

Category/
Type

Transaction ID : B9B90DFDF8943487D8DC

Amount of Each Disbursement this Period

250.00

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. CrossClick Media, Inc. I (CCM)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Mailing Address 8725 S. Eastern Ave
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement
paid on account

Candidate Name

Category/
Type

Transaction ID : B23B136D463C3433DBBD

Amount of Each Disbursement this Period

250.00

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. CrossClick Media, Inc. I (CCM)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		07		2014

Mailing Address 8725 S. Eastern Ave
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement
paid on account

Candidate Name

Category/
Type

Transaction ID : BE6A5EE8E465F4596BFF

Amount of Each Disbursement this Period

700.00

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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

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

1200.00

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**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)
Foundation for a Greater America INC

Full Name (Last, First, Middle Initial)

A. CrossClick Media, Inc. I (CCM)

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	0		2	0	1	4

Mailing Address 8725 S. Eastern Ave
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement
provided cash for moving exp on behalf of CCM

Candidate Name

Category/
Type

Transaction ID : BFC0549DC86164979B28

Amount of Each Disbursement this Period

4	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. CrossClick Media, Inc. I (CCM)

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	1	4

Mailing Address 8725 S. Eastern Ave
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement
paid on account

Candidate Name

Category/
Type

Transaction ID : B9BA92F65DD5B444E913

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. CrossClick Media, Inc. I (CCM)

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	1	4

Mailing Address 8725 S. Eastern Ave
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement
paid on account

Candidate Name

Category/
Type

Transaction ID : B880C32B308364F85936

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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

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

3	9	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

3	9	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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)
Foundation for a Greater America INC

Full Name (Last, First, Middle Initial)

A. CrossClick Media, Inc. I (CCM)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		15		2014

Mailing Address 8725 S. Eastern Ave
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement
paid on account

Candidate Name

Category/
Type

Transaction ID : B187D3F8A82DA40868D8

Amount of Each Disbursement this Period

2400.00

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. CrossClick Media, Inc. I (CCM)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2014

Mailing Address 8725 S. Eastern Ave
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement
debt repayment for contract call center work

Candidate Name

Category/
Type

Transaction ID : BF22DB728047C41C0B4F

Amount of Each Disbursement this Period

4400.00

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Mr. Milton C Ault III

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		21		2014

Mailing Address PO Box 3587

City Tustin State CA Zip Code 92781-3587

Purpose of Disbursement
pay exp report dtd 11/19 for \$73.43 owed by committee in full

Candidate Name

Category/
Type

Transaction ID : B922FFA78572343A4852

Amount of Each Disbursement this Period

73.43

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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

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

6873.43

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**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)
Foundation for a Greater America INC

Full Name (Last, First, Middle Initial)

A. Cappy's Cafe

Mailing Address 5930 Pacific Coast Highway

City Newport Beach State CA Zip Code 92663

Purpose of Disbursement meal - Milton Ault & Jim Hodgins - discussed upcoming mtg w/Robt Kaplan and progress of campaign
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 10 / 2014

Transaction ID : B73539C74FAB64FC78D3

Amount of Each Disbursement this Period

34.98

[MEMO ITEM]

meal - Milton Ault & Jim Hodgins - discussed upcoming mtg w/Robt Kaplan and progress of campaign

B. Fig Restaurant

Mailing Address 101 Wilshire Blvd

City Santa Monica State CA Zip Code 90401-1106

Purpose of Disbursement parking - for meeting at the Fig for Milton Ault & Robt Kaplan - discussing progress of campaign
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 19 / 2014

Transaction ID : B89AB09E338814627852

Amount of Each Disbursement this Period

10.00

[MEMO ITEM]

parking - for meeting at the Fig for Milton Ault & Robt Kaplan - discussing progress of campaign

C. Fig Restaurant

Mailing Address 101 Wilshire Blvd

City Santa Monica State CA Zip Code 90401-1106

Purpose of Disbursement meal - Milton Ault & Robt Kaplan - discussed status of campaign operations
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 19 / 2014

Transaction ID : B116A2AAE5BA94D768E7

Amount of Each Disbursement this Period

28.45

[MEMO ITEM]

meal - Milton Ault & Robt Kaplan - discussed status of campaign operations

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

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

0.00

**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)
Foundation for a Greater America INC

Full Name (Last, First, Middle Initial)

A. Mr. Milton C Ault III

Mailing Address PO Box 3587

City Tustin State CA Zip Code 92781-3587

Purpose of Disbursement
partial repay of debt related to Strategic Planning Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2014

Transaction ID : B6876299230D041E4A8B

Amount of Each Disbursement this Period

320.00

B. Mr. Milton C Ault III

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 3587

City Tustin State CA Zip Code 92781-3587

Purpose of Disbursement
partial repay of debt related to Strategic Planning Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 14 / 2014

Transaction ID : BE37599D11AA8469A845

Amount of Each Disbursement this Period

90.94

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

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

410.94

18567.42

**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 checked="" 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)
Foundation for a Greater America INC

Full Name (Last, First, Middle Initial)

A. (2) Finiks Capital, LLC

Mailing Address 28 Holly Lane

City Darien State CT Zip Code 06820-3303

Purpose of Disbursement
partial repayment of loan dtd 11/17 \$43,813.34

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 20 / 2014

Transaction ID : **BB173915586694A9E86D**

Amount of Each Disbursement this Period

7400.00

B. (2) Finiks Capital, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 28 Holly Lane

City Darien State CT Zip Code 06820-3303

Purpose of Disbursement
partail repay of loan dtd 11/17 \$43,813.34

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2014

Transaction ID : **BE109C1A2651342F69E9**

Amount of Each Disbursement this Period

22500.00

C. Mary E Coons

Full Name (Last, First, Middle Initial)

Mailing Address 1155 Prospect Ave

City Hartford State CT Zip Code 06105-1128

Purpose of Disbursement
partial repayment of debt

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 19 / 2014

Transaction ID : **B503D5BC0B40D45D19F5**

Amount of Each Disbursement this Period

600.00

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

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

30500.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input checked="" 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)
Foundation for a Greater America INC

Full Name (Last, First, Middle Initial)

A. Mary E Coons

Mailing Address 1155 Prospect Ave

City Hartford State CT Zip Code 06105-1128

Purpose of Disbursement
partial repayment of debt

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		20		2014

Transaction ID : **B99378CE504B74158A93**

Amount of Each Disbursement this Period

7400.00

Full Name (Last, First, Middle Initial)

B. Mary E Coons

Mailing Address 1155 Prospect Ave

City Hartford State CT Zip Code 06105-1128

Purpose of Disbursement
partial repayment of debt

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		24		2014

Transaction ID : **BB171AB430E534E28B99**

Amount of Each Disbursement this Period

20000.00

Full Name (Last, First, Middle Initial)

C. Mary E Coons

Mailing Address 1155 Prospect Ave

City Hartford State CT Zip Code 06105-1128

Purpose of Disbursement
partial debt repayment

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		24		2014

Transaction ID : **BA18F388F14A747CFB57**

Amount of Each Disbursement this Period

1000.00

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

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

28400.00

--

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input checked="" 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)
Foundation for a Greater America INC

Full Name (Last, First, Middle Initial)

A. Mary E Coons

Mailing Address 1155 Prospect Ave

City Hartford State CT Zip Code 06105-1128

Purpose of Disbursement
partial repayment of debt

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 18 / 2014

Transaction ID : B8DF85B94DABD420B971

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. (2) Finiks Capital, LLC

Mailing Address 28 Holly Lane

City Darien State CT Zip Code 06820-3303

Purpose of Disbursement
final pay on loan for \$6,500 dtd 3.17.14

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 17 / 2014

Transaction ID : BCD372BB8CFDB4CB7AD.

Amount of Each Disbursement this Period

5255.00

Full Name (Last, First, Middle Initial)

C. (2) Finiks Capital, LLC

Mailing Address 28 Holly Lane

City Darien State CT Zip Code 06820-3303

Purpose of Disbursement
partial repayment of debt

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2014

Transaction ID : B914CF4A87B904D98B52

Amount of Each Disbursement this Period

80.00

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

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

7335.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input checked="" 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)
Foundation for a Greater America INC

Full Name (Last, First, Middle Initial)

A. (2) Finiks Capital, LLC

Mailing Address 28 Holly Lane

City Darien State CT Zip Code 06820-3303

Purpose of Disbursement
repayment of debt

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2014

Transaction ID : **BB2AC5A3AF7BC446E905**

Amount of Each Disbursement this Period

105.00

Full Name (Last, First, Middle Initial)

B. (2) Finiks Capital, LLC

Mailing Address 28 Holly Lane

City Darien State CT Zip Code 06820-3303

Purpose of Disbursement
partial repayment of debt

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2014

Transaction ID : **B584418868F88425AB77**

Amount of Each Disbursement this Period

325.00

Full Name (Last, First, Middle Initial)

C. (2) Finiks Capital, LLC

Mailing Address 28 Holly Lane

City Darien State CT Zip Code 06820-3303

Purpose of Disbursement
final payoff on loan dtd 8/20/14

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 17 / 2014

Transaction ID : **B1FDB8CB3711240B8858**

Amount of Each Disbursement this Period

500.00

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

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

930.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input checked="" 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)
Foundation for a Greater America INC

Full Name (Last, First, Middle Initial)

A. Ms. Kyleen Cane

Mailing Address 3273 E Warm Springs Rd

City Henderson State NV Zip Code 89014

Purpose of Disbursement
paid on account

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
10			17			2014			

Transaction ID : B2225A2EA946A46B0BBF

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. James P Hodgins

Mailing Address PO Box 3587

City Tustin State CA Zip Code 92781-3587

Purpose of Disbursement
debt repayment for contract tsy services

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
11			07			2014			

Transaction ID : BCDF825EFD96244A98E1

Amount of Each Disbursement this Period

200.00

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	/	D	D	/	Y	Y	Y	Y

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)..... ▶

700.00

67865.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input checked="" 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)
Foundation for a Greater America INC

Full Name (Last, First, Middle Initial)

A. (2) Finiks Capital, LLC

Mailing Address 28 Holly Lane

City Darien State CT Zip Code 06820-3303

Purpose of Disbursement
loan to Finiks to invest in small cap equities

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 18 / 2014

Transaction ID : B33A67EE5CED844F9A6A

Amount of Each Disbursement this Period

21100.00

Full Name (Last, First, Middle Initial)

B. (2) Finiks Capital, LLC

Mailing Address 28 Holly Lane

City Darien State CT Zip Code 06820-3303

Purpose of Disbursement
loan to Finiks to invest in small cap equities

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 18 / 2014

Transaction ID : BF994DA24EF4E48F6A3A

Amount of Each Disbursement this Period

100000.00

Full Name (Last, First, Middle Initial)

C. (2) Finiks Capital, LLC

Mailing Address 28 Holly Lane

City Darien State CT Zip Code 06820-3303

Purpose of Disbursement
loan to Finiks to invest in the small cap markets

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 17 / 2014

Transaction ID : B0BFE50FCF4F24448B07

Amount of Each Disbursement this Period

43813.34

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

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

164913.34

164913.34

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)
Foundation for a Greater America INC

Full Name (Last, First, Middle Initial)

A. Mr. James Quint

Mailing Address 49 Wilson St

City Hartford State CT Zip Code 06106-3544

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2014

Transaction ID : **B5C152E79135B4B70BB1**

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Mr. James Quint

Mailing Address 49 Wilson St

City Hartford State CT Zip Code 06106-3544

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2014

Transaction ID : **B1CF02CE11B28480C815**

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

C. Mr. James Quint

Mailing Address 49 Wilson St

City Hartford State CT Zip Code 06106-3544

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2014

Transaction ID : **B8CBB945770C4E05BAE**

Amount of Each Disbursement this Period

100.00

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

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

300.00

**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 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)
Foundation for a Greater America INC

Full Name (Last, First, Middle Initial)

A. Mr. James Quint

Mailing Address 49 Wilson St

City Hartford State CT Zip Code 06106-3544

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

10 / 28 / 2014

Transaction ID : B04CE256FD09B4F5897B

Amount of Each Disbursement this Period

100.00

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

/ /

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

/ /

Amount of Each Disbursement this Period

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

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

100.00

400.00

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : **C33A67EE5CED844F9A6A**

LOAN SOURCE Full Name (Last, First, Middle Initial) (2) Finiks Capital, LLC	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
Mailing Address 28 Holly Lane	
City Darien State CT ZIP Code 06820-3303	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
21100.00	0.00	21100.00

TERMS

Date Incurred: MM / DD / YYYY / / Date Due: MM / DD / YYYY / / Interest Rate: % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)..... ▶	21100.00
TOTALS This Period (last page in this line only)..... ▶	<input type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : **CF994DA24EF4E48F6A3A**

LOAN SOURCE Full Name (Last, First, Middle Initial) (2) Finiks Capital, LLC	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
Mailing Address 28 Holly Lane	
City Darien State CT ZIP Code 06820-3303	

Original Amount of Loan 100000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 100000.00
--------------------------------------	------------------------------------	--

TERMS

Date Incurred: MM / DD / YYYY (11 / 18 / 2014) Date Due: MM / DD / YYYY (05 / 18 / 2016) Interest Rate: 10.00 % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶	100000.00
TOTALS This Period (last page in this line only)..... ▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : **C0BFE50FCF4F24448B07**

LOAN SOURCE Full Name (Last, First, Middle Initial) (2) Finiks Capital, LLC	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
Mailing Address 28 Holly Lane	
City Darien State CT ZIP Code 06820-3303	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
43813.34	0.00	43813.34

TERMS

Date Incurred: MM / DD / YYYY / / Date Due: MM / DD / YYYY / / Interest Rate: % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)..... ▶	43813.34
TOTALS This Period (last page in this line only)..... ▶	164913.34

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : C87D8DA3EDDDE45EBB43

LOAN SOURCE Full Name (Last, First, Middle Initial) 1-MCKEA Holdings, LLC	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
Mailing Address PO Box 3587	
City Tustin State CA ZIP Code 92781-3587	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
400.00	0.00	400.00

TERMS

Date Incurred: MM / DD / YYYY (10 / 22 / 2014) Date Due: MM / DD / YYYY (04 / 21 / 2015) Interest Rate: None % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶	400.00
TOTALS This Period (last page in this line only)..... ▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : **CF90F359E3C6E488384D**

LOAN SOURCE Full Name (Last, First, Middle Initial) Mary E Coons	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
Mailing Address 1155 Prospect Ave	
City Hartford State CT ZIP Code 06105-1128	

Original Amount of Loan 200000.00	Cumulative Payment To Date 31000.00	Balance Outstanding at Close of This Period 169000.00
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TERMS

Date Incurred MM / DD / YYYY 11 / 14 / 2014	Date Due MM / DD / YYYY 11 / 28 / 2014	Interest Rate None % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶	169000.00
TOTALS This Period (last page in this line only)..... ▶	[]
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : **C46B79B6C52864203B62**

LOAN SOURCE Full Name (Last, First, Middle Initial) (2) Finiks Capital, LLC	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
Mailing Address 28 Holly Lane	
City Darien State CT ZIP Code 06820-3303	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
6500.00	6919.23	-419.23

TERMS

Date Incurred: M M / D D / Y Y Y Y Y Y / /

Date Due: M M / D D / Y Y Y Y Y Y / /

Interest Rate: % (apr)

Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="-419.23"/>
TOTALS This Period (last page in this line only)..... ▶	<input type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : C03FBD4CC1C29458DA31

LOAN SOURCE Full Name (Last, First, Middle Initial) (2) Finiks Capital, LLC	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
Mailing Address 28 Holly Lane	
City Darien State CT ZIP Code 06820-3303	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
500.00	512.43	-12.43

TERMS

Date Incurred: M / D / Y 08 / 20 / 2014
 Date Due: M / D / Y 08 / 22 / 2016
 Interest Rate: 10.00 % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)..... ▶	-12.43
TOTALS This Period (last page in this line only)..... ▶	<input type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : C7CB9F40054354075857

LOAN SOURCE Full Name (Last, First, Middle Initial) Ms. Kyleen Cane	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
Mailing Address 3273 E Warm Springs Rd	
City Henderson State NV ZIP Code 89014	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10700.00	750.00	9950.00

TERMS

Date Incurred: MM / DD / YYYY (07 / 11 / 2014) Date Due: MM / DD / YYYY (08 / 25 / 2014) Interest Rate: 18.00 % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶	9950.00
TOTALS This Period (last page in this line only)..... ▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : C2132642B6D3F4B7FBAE

LOAN SOURCE Full Name (Last, First, Middle Initial) Mr. James P Hodgins	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
Mailing Address PO Box 3587	
City Tustin State CA ZIP Code 92781-3587	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
200.00	200.00	0.00

TERMS

Date Incurred: MM/DD/YYYY 09/30/2014 Date Due: MM/DD/YYYY 09/30/2016 Interest Rate: None % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶	0.00
TOTALS This Period (last page in this line only)..... ▶	178918.34

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 39 OF 56
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CSC - Corporation Service Company		Nature of Debt (Purpose): Documents Services Company
Mailing Address PO Box 13397		
City Philadelphia	State PA	Zip Code 19101-3397

Outstanding Balance Beginning This Period	Transaction ID : DF7191FD703624ED9939	
<input type="text" value="552.00"/>	Amount Incurred This Period	Payment This Period
	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
		Outstanding Balance at Close of This Period
		<input type="text" value="552.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor InFind.com, Inc.		Nature of Debt (Purpose): Foundation Management Consulting Services
Mailing Address 12021 Wilshire Blvd Suite 634		
City Los Angeles	State CA	Zip Code 90025-1206

Outstanding Balance Beginning This Period	Transaction ID : D07AA83A2B1C442CB9FF	
<input type="text" value="6100.00"/>	Amount Incurred This Period	Payment This Period
	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
		Outstanding Balance at Close of This Period
		<input type="text" value="6100.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor John Cowan Law		Nature of Debt (Purpose): legal services
Mailing Address 100 Pine Street Suite 1250		
City San Francisco	State CA	Zip Code 94111-5235

Outstanding Balance Beginning This Period	Transaction ID : D0CD3DFBC059C4F46942	
<input type="text" value="16550.15"/>	Amount Incurred This Period	Payment This Period
	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
		Outstanding Balance at Close of This Period
		<input type="text" value="16550.15"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="23202.15"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 40 OF 56
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor InFind.com, Inc.	Nature of Debt (Purpose): Foundation Management Consultant
Mailing Address 12021 Wilshire Blvd Suite 634	
City State Zip Code Los Angeles CA 90025-1206	

Outstanding Balance Beginning This Period <input type="text" value="10000.00"/>	Transaction ID : D73243F62F80C4F16845	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="10000.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jeff Taylor Graphics	Nature of Debt (Purpose): Logo Design - Voters For Hillary
Mailing Address 2633 Lincoln Blvd. Suite 837	
City State Zip Code Santa Monica CA 90405-4619	

Outstanding Balance Beginning This Period <input type="text" value="800.00"/>	Transaction ID : D1AD9BB288B164F50AAC	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="800.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jeff Taylor Graphics	Nature of Debt (Purpose): Graphic Design - Logo for FFAGA
Mailing Address 2633 Lincoln Blvd. Suite 837	
City State Zip Code Santa Monica CA 90405-4619	

Outstanding Balance Beginning This Period <input type="text" value="800.00"/>	Transaction ID : D3471344D898C40EFAD0	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="800.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="11600.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 41 OF 56
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Womble Carlyle Sandridge & Rice LLP	Nature of Debt (Purpose): legal services
Mailing Address 1200 Nineteenth St. N.W. Suite 500	
City State Zip Code Washington DC 20036-2421	

Outstanding Balance Beginning This Period <input type="text" value="9049.42"/>	Transaction ID : D25460DF3EB12497286A	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="9049.42"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Womble Carlyle Sandridge & Rice LLP	Nature of Debt (Purpose): legal services
Mailing Address 1200 Nineteenth St. N.W. Suite 500	
City State Zip Code Washington DC 20036-2421	

Outstanding Balance Beginning This Period <input type="text" value="2888.50"/>	Transaction ID : DA419BD9C7E6541A1B0C	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2888.50"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. James P Hodgins	Nature of Debt (Purpose): Monthly Compliance Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period <input type="text" value="1205.00"/>	Transaction ID : D37A80DF93FD24A89A95	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="100.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1105.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="13042.92"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 42 OF 56
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor InFind.com, Inc.	Nature of Debt (Purpose): Foundation Management Consultant
Mailing Address 12021 Wilshire Blvd Suite 634	
City State Zip Code Los Angeles CA 90025-1206	

Outstanding Balance Beginning This Period 10000.00	Transaction ID : DA11BD6963DCC4EB4ADC	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CSC - Corporation Service Company	Nature of Debt (Purpose): Documents Services Company - late charge (interest)
Mailing Address PO Box 13397	
City State Zip Code Philadelphia PA 19101-3397	

Outstanding Balance Beginning This Period 33.84	Transaction ID : DB1B9E54AFE454C2D967	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 33.84

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International, Inc.	Nature of Debt (Purpose): Credit Card Processing Fees
Mailing Address 205 Pennsylvania Ave., SE	
City State Zip Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period 75.46	Transaction ID : D21F0A10BB40B497D9E3	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 75.46

1) SUBTOTALS This Period This Page (optional)..... ▶	10109.30
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 43 OF 56
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International, Inc.	Nature of Debt (Purpose): Consulting for Compliance re quarterly filing of FEC report
Mailing Address 205 Pennsylvania Ave., SE	
City State Zip Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period 692.18	Transaction ID : DB8C90B46C113494B978	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 692.18

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jeff Taylor Graphics	Nature of Debt (Purpose): Graphic Design - VFH Letterhead & word doc
Mailing Address 2633 Lincoln Blvd. Suite 837	
City State Zip Code Santa Monica CA 90405-4619	

Outstanding Balance Beginning This Period 475.00	Transaction ID : DEB91E31A3D3F489CAB6	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 475.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Womble Carlyle Sandridge & Rice LLP	Nature of Debt (Purpose): Legal Services
Mailing Address 1200 Nineteenth St. N.W. Suite 500	
City State Zip Code Washington DC 20036-2421	

Outstanding Balance Beginning This Period 327.00	Transaction ID : DF1CA96753B3F425C80C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 327.00

1) SUBTOTALS This Period This Page (optional)..... ▶	1494.18
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 44 OF 56
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Anastasia Ault	Nature of Debt (Purpose): Office Supplies
Mailing Address 8686 Merced Circle Unit 1007 D	
City State Zip Code Costa Mesa CA 92626	

Outstanding Balance Beginning This Period <input type="text" value="12.71"/>	Transaction ID : D8D6CE9A7F5454A24BC0	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="12.71"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. James P Hodgins	Nature of Debt (Purpose): Monthly Compliance Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period <input type="text" value="1500.00"/>	Transaction ID : D052A72C79AB14D00B08	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International, Inc.	Nature of Debt (Purpose): Credit Card Processing Fees
Mailing Address 205 Pennsylvania Ave., SE	
City State Zip Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period <input type="text" value="138.70"/>	Transaction ID : DFBBF69AB45144D4E81F	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="138.70"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="1651.41"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 45 OF 56
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. James P Hodgins	Nature of Debt (Purpose): Office supplies - pen ink cartridges
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period <input type="text" value="6.47"/>	Transaction ID : D54B07E53C6584FF8B9D	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="6.47"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. James P Hodgins	Nature of Debt (Purpose): campaign mailing expenses - stamps and misc paper, ink, etc
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period <input type="text" value="2.58"/>	Transaction ID : DCF5D10D02C884E8D957	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2.58"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Propel Management Group, Inc.	Nature of Debt (Purpose): Consulting Services for Call Center Compliance
Mailing Address 3625 West Mac Arthur Blvd Suite 302	
City State Zip Code Santa Ana CA 92704-6849	

Outstanding Balance Beginning This Period <input type="text" value="726.78"/>	Transaction ID : D00ADF2BA0F3941BB967	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="726.78"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="735.83"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 46 OF 56
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International, Inc.	Nature of Debt (Purpose): Aristotle - merchant bank services
Mailing Address 205 Pennsylvania Ave., SE	
City State Zip Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period 6.69	Transaction ID : DE46C1F0385954AB58C1	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6.69

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CrossClick Media, Inc. I (CCM)	Nature of Debt (Purpose): Call Center - Outreach to potential Contributors
Mailing Address 8725 S. Eastern Ave Suite 200-661	
City State Zip Code Las Vegas NV 89123-3243	

Outstanding Balance Beginning This Period 38729.38	Transaction ID : D9F340288E3904A73ABF	
Amount Incurred This Period 0.00	Payment This Period 12600.00	Outstanding Balance at Close of This Period 26129.38

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. James P Hodgins	Nature of Debt (Purpose): Monthly Compliance Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period 1500.00	Transaction ID : DF0F31E3EF9C949FDA8D	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

1) SUBTOTALS This Period This Page (optional)..... ▶	27636.07
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 47 OF 56
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Anastasia Ault	Nature of Debt (Purpose): Office supplies
Mailing Address 8686 Merced Circle Unit 1007 D	
City State Zip Code Costa Mesa CA 92626	

Outstanding Balance Beginning This Period 28.80	Transaction ID : D18D8EB6C2535471ABD6	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 28.80

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CSC - Corporation Service Company	Nature of Debt (Purpose): late charge on bal due
Mailing Address PO Box 13397	
City State Zip Code Philadelphia PA 19101-3397	

Outstanding Balance Beginning This Period 7.56	Transaction ID : DA2483CFD4CB64896951	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7.56

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International, Inc.	Nature of Debt (Purpose): Aristotle - consulting services Dave Mason re filing FEC form 3x on 7/15/14
Mailing Address 205 Pennsylvania Ave., SE	
City State Zip Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period 150.00	Transaction ID : D8F8AB75A0F104389A69	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 150.00

1) SUBTOTALS This Period This Page (optional)..... ▶	186.36
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 48 OF 56
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International, Inc.	Nature of Debt (Purpose): Aristotle merchant banking services
Mailing Address 205 Pennsylvania Ave., SE	
City State Zip Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period 6.52	Transaction ID : DEA270B1A0A3A4AE09BB	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6.52

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. James P Hodgins	Nature of Debt (Purpose): Monthly Compliance Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period 1500.00	Transaction ID : DB1F2A24F74634E479CD	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CSC - Corporation Service Company	Nature of Debt (Purpose): late charge on bal due
Mailing Address PO Box 13397	
City State Zip Code Philadelphia PA 19101-3397	

Outstanding Balance Beginning This Period 8.28	Transaction ID : D843E97F3F00F4209B3D	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 8.28

1) SUBTOTALS This Period This Page (optional)..... ▶	1514.80
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 49 OF 56
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Womble Carlyle Sandridge & Rice LLP	Nature of Debt (Purpose): legal services from FEC Counsel - James Kahl
Mailing Address 1200 Nineteenth St. N.W. Suite 500	
City State Zip Code Washington DC 20036-2421	

Outstanding Balance Beginning This Period <input type="text" value="436.00"/>	Transaction ID : D5277CB0A39B4404AB71	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="436.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International, Inc.	Nature of Debt (Purpose): Quarterly fee for website management
Mailing Address 205 Pennsylvania Ave., SE	
City State Zip Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period <input type="text" value="2750.00"/>	Transaction ID : D984D9F4A5BC94A6EAEF	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2750.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. James P Hodgins	Nature of Debt (Purpose): Monthly Compliance Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period <input type="text" value="1500.00"/>	Transaction ID : D20BE86A921BD40849B4	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1500.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="4686.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 50 OF 56
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International, Inc.	Nature of Debt (Purpose): Aristotle - merchant bank services
Mailing Address 205 Pennsylvania Ave., SE	
City State Zip Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period 44.04	Transaction ID : D3ABE36F594BB4E4F81C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 44.04

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CSC - Corporation Service Company	Nature of Debt (Purpose): carrying cost for one month
Mailing Address PO Box 13397	
City State Zip Code Philadelphia PA 19101-3397	

Outstanding Balance Beginning This Period 8.28	Transaction ID : D0F1307F3ED95485B940	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 8.28

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. James P Hodgins	Nature of Debt (Purpose): Monthly Compliance Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period 1500.00	Transaction ID : DB5E9C4E411154911A67	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

1) SUBTOTALS This Period This Page (optional)..... ▶	1552.32
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 51 OF 56
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CSC - Corporation Service Company	Nature of Debt (Purpose): CSC prov doc serv - this is int chgs for Sep 14
Mailing Address PO Box 13397	
City State Zip Code Philadelphia PA 19101-3397	

Outstanding Balance Beginning This Period 8.28	Transaction ID : DB264CB018C124D45A43	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 8.28

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. Milton C Ault III	Nature of Debt (Purpose): Board approved payment to Chairman - monthly of \$500.00
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period 410.94	Transaction ID : D8FED2F8C41354540902	
Amount Incurred This Period 0.00	Payment This Period 410.94	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor 1NW Contact	Nature of Debt (Purpose): commissions for raising funds for Voter for Hillary
Mailing Address 223 E Thousand Oaks Blvd	
City State Zip Code Thousand Oaks CA 91360-5803	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D72EA198B61B94F82A78	
Amount Incurred This Period 104.72	Payment This Period 0.00	Outstanding Balance at Close of This Period 104.72

1) SUBTOTALS This Period This Page (optional)..... ▶	113.00
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 52 OF 56
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Propel Management Group, Inc.	Nature of Debt (Purpose): Propel works as liaison for 1NW Contact
Mailing Address 3625 West Mac Arthur Blvd Suite 302	
City State Zip Code Santa Ana CA 92704-6849	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D4BCB11895D634D77B7A	
Amount Incurred This Period 129.55	Payment This Period 0.00	Outstanding Balance at Close of This Period 129.55

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International, Inc.	Nature of Debt (Purpose): softward provider for FEC filings
Mailing Address 205 Pennsylvania Ave., SE	
City State Zip Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DAB032B4AFE6F43578D6	
Amount Incurred This Period 24.13	Payment This Period 0.00	Outstanding Balance at Close of This Period 24.13

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Anastasia Ault	Nature of Debt (Purpose): USPS - purch stamps for mailing for Hillary campaign
Mailing Address 8686 Merced Circle Unit 1007 D	
City State Zip Code Costa Mesa CA 92626	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D97175D1E94414F3DB43	
Amount Incurred This Period 19.60	Payment This Period 0.00	Outstanding Balance at Close of This Period 19.60

1) SUBTOTALS This Period This Page (optional)..... ▶	173.28
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 53 OF 56
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. James P Hodgins	Nature of Debt (Purpose): partial payment versus accrued Board approved Consulting Contract for treasury services
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DA96C8592C1024B0AB6A	
Amount Incurred This Period 1500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor 1NW Contact	Nature of Debt (Purpose): commissions for raising money for Voters for Hillary
Mailing Address 223 E Thousand Oaks Blvd	
City State Zip Code Thousand Oaks CA 91360-5803	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D05E5934EFAF84FC8804	
Amount Incurred This Period 65.86	Payment This Period 0.00	Outstanding Balance at Close of This Period 65.86

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CSC - Corporation Service Company	Nature of Debt (Purpose): CSC provided doc services - this is int chg for Oct 14
Mailing Address PO Box 13397	
City State Zip Code Philadelphia PA 19101-3397	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DC16094DD05A2451B94C	
Amount Incurred This Period 8.28	Payment This Period 0.00	Outstanding Balance at Close of This Period 8.28

1) SUBTOTALS This Period This Page (optional)..... ▶	1574.14
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 54 OF 56
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CrossClick Media, Inc. I (CCM)	Nature of Debt (Purpose): pro rata share of rent/phn/util & callers
Mailing Address 8725 S. Eastern Ave Suite 200-661	
City State Zip Code Las Vegas NV 89123-3243	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D75D7D386EFDD4D1397C	
Amount Incurred This Period 3805.33	Payment This Period 174.71	Outstanding Balance at Close of This Period 3630.62

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CrossClick Media, Inc. I (CCM)	Nature of Debt (Purpose): Technology & Admin Services re websites, interface w/Aristotle
Mailing Address 8725 S. Eastern Ave Suite 200-661	
City State Zip Code Las Vegas NV 89123-3243	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D34CA1398AA9D45B2B7F	
Amount Incurred This Period 14003.50	Payment This Period 2925.29	Outstanding Balance at Close of This Period 11078.21

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. Milton C Ault III	Nature of Debt (Purpose): Strategic Planning Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D8FE72748DB46480E96F	
Amount Incurred This Period 500.00	Payment This Period 409.06	Outstanding Balance at Close of This Period 90.94

1) SUBTOTALS This Period This Page (optional)..... ▶	14799.77
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 55 OF 56
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International, Inc.	Nature of Debt (Purpose): Aristotle - software & website services
Mailing Address 205 Pennsylvania Ave., SE	
City State Zip Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DEA5BF95CA1124A63873	
Amount Incurred This Period 2750.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2750.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. Milton C Ault III	Nature of Debt (Purpose): meal meetings w/Legal -Strategic Planning Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DFBD3EBCBBCE14F2DAE	
Amount Incurred This Period 595.13	Payment This Period 595.13	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. Milton C Ault III	Nature of Debt (Purpose): meal - reviewed 2nd quarter filing FEC form 3x w/Strategic Planning Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DAD8F22C972F4411A87D	
Amount Incurred This Period 73.43	Payment This Period 73.43	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	2750.00
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 56 OF 56
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Joe Spaziano	Nature of Debt (Purpose): bot video card for staff computer
Mailing Address 1928 E. Van Owen Ave Apartment A	
City State Zip Code Orange CA 92867-3934	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : D7B8C13A870494EFE826	
Amount Incurred This Period <input type="text" value="80.96"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="80.96"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="80.96"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="116902.49"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="178918.34"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="295820.83"/>