

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

Office Use Only

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

12FE4M5

National Association of Realtors Congressional Fund

ADDRESS (number and street)

430 North Michigan Avenue

☐ Check if different than previously reported. (ACC)

Chicago

IL

60611-4011

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00488742

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

(c) 12-Day

PRE-Election

Report for the:

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

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

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

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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 Michael C McGrew

Signature of Treasurer

Michael C McGrew

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

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

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

National Association of Realtors Congressional Fund

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
09 / 01 / 2014 To: M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2014		30495.61
(b) Cash on Hand at Beginning of Reporting Period.....	6325809.63	
(c) Total Receipts (from Line 19)	484.80	8023701.80
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	6326294.43	8054197.41
7. Total Disbursements (from Line 31)	6263499.80	7991402.78
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	62794.63	62794.63
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

National Association of Realtors Congressional Fund

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

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).....	484.80	8023701.80
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	484.80	8023701.80
(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)	484.80	8023701.80
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	484.80	8023701.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	484.80	8023701.80

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	790663.80	1167116.78
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	790663.80	1167116.78
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)	5472836.00	6824286.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	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)) ..	6263499.80	7991402.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6263499.80	7991402.78

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)	484.80	8023701.80
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	484.80	8023701.80
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	790663.80	1167116.78
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	790663.80	1167116.78

: 97 'A -G7 9 @ 5 B9 CI G'H9 LH'F9 @ 5 H98 'HC '5 'F9 DCFH ZG7 <98 I @ 'CF 'H9 A -N5 HCB

Form/Schedule: F3XN

Transaction ID :

For Line 21b of this report, the disbursements to 720 Strategies LLC on 9/11/14 for \$6,700.00, Fenn Communications Group on 9/11/14 for \$95,000.00, 720 Strategies LLC on 9/23/14 for \$7,000.00, Meath Media Group on 9/23/14 for \$25,000.00, 720 Strategies LLC on 9/30/14 for \$16,800.00, Majority Strategies on 9/12/14 for \$226,549.00, Strategic Partners & Media Inc. on 9/11/14 for \$84,000.00, Strategic Partners & Media Inc on 9/12/14 for \$63,000.00, & Strategic Partners & Media Inc. on 9/12/14 for \$536,000.00 represent advance costs for Independent Expenditures that were not publicly disseminated during this reporting period, but instead will be disseminated in future reporting periods. For the following items, a negative amount are reflected on Line 21b of this report and corresponding positive amounts are reflected on Line 24. For the Line 21b negative entries, the full purpose of disbursement should be noted as Transfer to Line 24, Independent Expenditure disseminated. The items are: 720 Strategies LLC dated 9/15/14 for \$3,500.00, JKM Consulting dated 9/15/14 for 26,070.00, 720 Strategies dated 9/15/14 for \$3,500.00, Peter D Hart Research Associates Inc. dated 9/22/14 for \$36,900.00, 720 Strategies LLC dated 9/15/14 for \$3,500.00, Peter D Hart Associates Inc dated 9/24/14 for \$29,400.00, 720 Strategies LLC dated 9/15/14 for \$3,500.00, 720 Strategies LLC dated 9/25/14 for \$3,500.00, DDC advocacy dated 9/18/14 for \$67,000.00, Public Opinion Strategies LLC dated 9/12/14 for \$29,000.00, Public Opinion Strategies LLC dated 9/24/14 for \$28,000.00, & Public Opinion Strategies LLC dated 9/18/14 for \$36,000.00. For the Line 24 corresponding positive entries, the full purpose of each disbursement is as follows: 720 Strategies LLC dated 9/15/14 for \$3,500.00 transfer website design costs in support of Rep. Patrick Murphy, JKM Consulting dated 9/15/14 for 26,070.00 transfer online video production costs in support of Rep. Patrick Murphy, 720 Strategies dated 9/15/14 for \$3,500.00 transfer website design costs in support of Tom Reed, Peter D Hart Research Associates Inc. dated 9/22/14 for \$36,900.00 transfer polling expense costs in support of Sen. Mark Begich, 720 Strategies LLC dated 9/15/14 for \$3,500.00 transfer website design costs in support of Rep. Chris P. Gibson, Peter D Hart Associates Inc dated 9/24/14 for \$29,400.00 transfer polling expense costs in support of Rep. Patrick Murphy, 720 Strategies LLC dated 9/18/14 for \$3,500.00 transfer website design costs in support of Sen. Mark Begich, 720 Strategies LLC dated 9/25/14 for \$3,500.00 transfer website design costs in support of Rep. Joe J. Heck, DDC advocacy dated 9/18/14 for \$67,000.00 transfer research & survey expense costs in support of Sen. Mitch McConnell, Public Opinion Strategies LLC dated 9/12/14 for \$29,000.00 transfer polling expense costs in support of Ryan Costello, Public Opinion Strategies LLC dated 9/24/14 for \$28,000.00 transfer polling expense costs in support of Rep. Joe J. Heck, and Public Opinion Strategies LLC dated 9/18/14 for \$36,000.00 transfer polling expense costs in support of Sen. Mitch McConnell.

Form/Schedule:

Transaction ID:

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 37

(check only one)

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

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

NAME OF COMMITTEE (In Full)

National Association of Realtors Congressional Fund

Full Name (Last, First, Middle Initial)

A. NATIONAL ASSOCIATION OF REALTORS

Mailing Address 430 N Michigan Avenue

City State Zip Code
Chicago IL 60611-4011

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Corporation

n/a

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8023378.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 15 2014

Transaction ID : A6404219A1AF9446EB37

Amount of Each Receipt this Period

161.60

In-Kind: administrative & compliance support

Full Name (Last, First, Middle Initial)

B. NATIONAL ASSOCIATION OF REALTORS

Mailing Address 430 N Michigan Avenue

City State Zip Code
Chicago IL 60611-4011

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Corporation

n/a

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8023701.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 30 2014

Transaction ID : AE2C84F8780EA41788F1

Amount of Each Receipt this Period

323.20

In-Kind: administrative & compliance support

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

484.80

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

484.80

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

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

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NAME OF COMMITTEE (In Full)

National Association of Realtors Congressional Fund

Full Name (Last, First, Middle Initial)

A. 720 Strategies LLC

Mailing Address 1111 19th St NW

City Washington State DC Zip Code 20036-3603

Purpose of Disbursement
Advance payment for website design costs

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2014
Transaction ID : B6FC53C395C2E47D1A4B

Amount of Each Disbursement this Period

6700.00

Full Name (Last, First, Middle Initial)

B. Fenn Communications GroupMailing Address 2715 M St NW
Ste 150

City Washington State DC Zip Code 20007-3733

Purpose of Disbursement
Advance pmnt for Internet Ads

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2014
Transaction ID : B1426933E47B0460290E

Amount of Each Disbursement this Period

95000.00

Full Name (Last, First, Middle Initial)

C. 720 Strategies LLC

Mailing Address 1111 19th St NW

City Washington State DC Zip Code 20036-3603

Purpose of Disbursement
Trsr from Line 21b to Line 24 (See memo text for detailed explanation)

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2014
Transaction ID : B3148F23553F04A09B4F

Amount of Each Disbursement this Period

-3500.00

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

98200.00

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)

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

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NAME OF COMMITTEE (In Full)

National Association of Realtors Congressional Fund

Full Name (Last, First, Middle Initial)

A. 720 Strategies LLC

Mailing Address 1111 19th St NW

City Washington State DC Zip Code 20036-3603

Purpose of Disbursement
Trsr from Line 21b to Line 24 (See memo text for detailed explanation)

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 Y
09 / 15 / 2014

Transaction ID : BC9233486B03A496D93C

Amount of Each Disbursement this Period

-3500.00

Full Name (Last, First, Middle Initial)

B. JKM CONSULTING

Mailing Address 4441 Klingen St NW

City Washington State DC Zip Code 20016-3578

Purpose of Disbursement
Trsr from Line 21b to Line 24 (See memo text for detailed explanation)

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 Y
09 / 15 / 2014

Transaction ID : BEE83371705B7441F91F

Amount of Each Disbursement this Period

-26070.00

Full Name (Last, First, Middle Initial)

C. 720 Strategies LLC

Mailing Address 1111 19th St NW

City Washington State DC Zip Code 20036-3603

Purpose of Disbursement
Trsr from Line 21b to Line 24 (See memo text for detailed explanation)

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 Y
09 / 15 / 2014

Transaction ID : B5E5F004EB9BB488CB3F

Amount of Each Disbursement this Period

-3500.00

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

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

-33070.00

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

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

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NAME OF COMMITTEE (In Full)

National Association of Realtors Congressional Fund

Full Name (Last, First, Middle Initial)

A. 720 Strategies LLC

Mailing Address 1111 19th St NW

City Washington State DC Zip Code 20036-3603

Purpose of Disbursement
Trsr to Line 24 (See memo text for detailed explanation)

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014
Transaction ID : B4E0CE142B6FF4A86A82

Amount of Each Disbursement this Period

-3500.00

Full Name (Last, First, Middle Initial)

B. Peter D Hart Research Associates Inc

Mailing Address 1724 Connecticut Ave NW

City Washington State DC Zip Code 20009-1103

Purpose of Disbursement
Trsr to Line 24 (See memo text for detailed explanation)

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2014
Transaction ID : BFD20F2AC86DE4C578EA

Amount of Each Disbursement this Period

-36900.00

Full Name (Last, First, Middle Initial)

C. 720 Strategies LLC

Mailing Address 1111 19th St NW

City Washington State DC Zip Code 20036-3603

Purpose of Disbursement
Advance payment for website design costs

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2014
Transaction ID : BF73ECFAA3F344CC88CF

Amount of Each Disbursement this Period

7000.00

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

-33400.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Realtors Congressional Fund

Full Name (Last, First, Middle Initial)

A. Meath Media Group

Mailing Address 4441 Klinge St., NW

City Washington State DC Zip Code 20016-3578

Purpose of Disbursement
Advance payment for online video production costs

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2014
Transaction ID : BC25F0601295749BAB6A

Amount of Each Disbursement this Period

25000.00

Full Name (Last, First, Middle Initial)

B. Peter D Hart Research Associates Inc

Mailing Address 1724 Connecticut Ave NW

City Washington State DC Zip Code 20009-1103

Purpose of Disbursement
Trsr to Line 24 (See memo text for detailed explanation)

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 24 / 2014
Transaction ID : B77A979DCC99143569AF

Amount of Each Disbursement this Period

-29400.00

Full Name (Last, First, Middle Initial)

C. 720 Strategies LLC

Mailing Address 1111 19th St NW

City Washington State DC Zip Code 20036-3603

Purpose of Disbursement
Trsr to Line 24 (See memo text for detailed explanation)

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2014
Transaction ID : B01378A6F22CA46AA84A

Amount of Each Disbursement this Period

-3500.00

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

-7900.00

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

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

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NAME OF COMMITTEE (In Full)

National Association of Realtors Congressional Fund

Full Name (Last, First, Middle Initial)

A. 720 Strategies LLC

Mailing Address 1111 19th St NW

City Washington State DC Zip Code 20036-3603

Purpose of Disbursement
Advance payment for Website design costs

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
09 / 30 / 2014
Transaction ID : B00B5A8D00B8341159B6

Amount of Each Disbursement this Period

16800.00

Full Name (Last, First, Middle Initial)

B. Majority StrategiesMailing Address 135 Professional Dr
Ste 104

City Ponte Vedra Beach State FL Zip Code 32082-6277

Purpose of Disbursement
Advance payment for direct mail costs

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
09 / 12 / 2014
Transaction ID : B97E99FC48679474EA01

Amount of Each Disbursement this Period

226549.00

Full Name (Last, First, Middle Initial)

C. NATIONAL ASSOCIATION OF REALTORS

Mailing Address 430 N Michigan Avenue

City Chicago State IL Zip Code 60611-4011

Purpose of Disbursement
In-Kind: administrative & compliance support

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
09 / 15 / 2014
Transaction ID : B60C4577966C047C0804

Amount of Each Disbursement this Period

161.60

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

243510.60

<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

National Association of Realtors Congressional Fund

A. NATIONAL ASSOCIATION OF REALTORS

Date of Disbursement

Transaction ID : B90C297BBFB92490CA3E

Amount of Each Disbursement this Period

323.20

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

Full Name (Last, First, Middle Initial)

B. Strategic Partners & Media, Inc

Date of Disbursement

MM / DD / YYYY

Mailing Address PO Box 480

City	State	Zip Code
Arnold	MD	21012-0480

Transaction ID : B362C99BF5F834497BD4

Purpose of Disbursement
Advance pymnt for Internet Ad costs

Amount of Each Disbursement this Period

84000.00

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

Disbursement For:

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

State: District:

Full Name (Last, First, Middle Initial)

C. Strategic Partners & Media, Inc

Date of Disbursement

Mailing Address PO Box 480

City	State	Zip Code
Arnold	MD	21012-0480

Transaction ID : BBFC68C024C834D36AFF

Purpose of Disbursement
Advance pymnt for Internet Ad Costs

Amount of Each Disbursement this Period

63000.00

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

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

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

147323.20

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

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

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

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

NAME OF COMMITTEE (In Full)

National Association of Realtors Congressional Fund

Full Name (Last, First, Middle Initial)

A. Strategic Partners & Media, Inc

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				1	2		2	0	1	4		

Mailing Address PO Box 480

Transaction ID : BF7E07A16E0374C5792D

City	State	Zip Code
Arnold	MD	21012-0480

Amount of Each Disbursement this Period

Purpose of Disbursement
Advance payment for Digital/Online Ad costsCategory/
Type

536000.00

Candidate Name

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

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

State: District:

Full Name (Last, First, Middle Initial)

B. DDC Advocacy

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				1	8		2	0	1	4		

Mailing Address 174 Waterfront St
Ste 500**Transaction ID : BA6B5A73D4FCE43068E2**

City	State	Zip Code
Oxon Hill	MD	20745-1161

Amount of Each Disbursement this Period

Purpose of Disbursement
Trsr to Line 24 (See memo text for detailed explanation)Category/
Type

-67000.00

Candidate Name

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

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

State: District:

Full Name (Last, First, Middle Initial)

C. Public Opinion Strategies, LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				1	2		2	0	1	4		

Mailing Address 214 N Fayette St

Transaction ID : B5CEB1F57ADEB424C94E

City	State	Zip Code
Alexandria	VA	22314-2433

Amount of Each Disbursement this Period

Purpose of Disbursement
Trsr to Line 24 (See memo text for detailed explanation)Category/
Type

-29000.00

Candidate Name

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

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

State: District:

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

440000.00

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

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

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NAME OF COMMITTEE (In Full)

National Association of Realtors Congressional Fund

Full Name (Last, First, Middle Initial)

A. Public Opinion Strategies, LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	8			2	0	1	4		

Mailing Address 214 N Fayette St

Transaction ID : B77FD3E4167F54824AA5

City	State	Zip Code
Alexandria	VA	22314-2433

Amount of Each Disbursement this Period

Purpose of Disbursement
Trsfr to Line 24 (See memo text for detailed explanation)Category/
Type

-36000.00

Candidate Name

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

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

State: District:

Full Name (Last, First, Middle Initial)

B. Public Opinion Strategies, LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	1	4		

Mailing Address 214 N Fayette St

Transaction ID : B6F1A6696B7C7407087A

City	State	Zip Code
Alexandria	VA	22314-2433

Amount of Each Disbursement this Period

Purpose of Disbursement
Trsfr to Line 24 (See memo text for detailed explanation)Category/
Type

-28000.00

Candidate Name

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

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

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

Amount of Each Disbursement this Period

City	State	Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

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

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

State: District:

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

-64000.00

790663.80

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 17 OF 37
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund			FEC IDENTIFICATION NUMBER ▼ C C00488742		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY					
Full Name of Payee Majority Strategies			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 12 / 2014		
Mailing Address 135 Professional Dr Ste 104			Amount 306334.00		
City Ponte Vedra Beach		State FL	Zip Code 32082-6277		Transaction ID : EAD21AB9FF5E145BD86C
Purpose of Expenditure Direct mail costs		Category/Type 		Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Ryan Costello			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 335834.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Rafferty Weiss Media			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 15 / 2014		
Mailing Address 7625 Wisconsin Avenue, Suite 300			Amount 25000.00		
City Bethesda		State MD	Zip Code 20814-6565		Transaction ID : E06C7CB37A38149C6884
Purpose of Expenditure Online video production costs		Category/Type 		Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Rep. Chris P. Gibson			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY
Calendar Year-To-Date Per Election for Office Sought 28600.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			331334.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			 		
(c) TOTAL Independent Expenditures..... ▶			 		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Michael McGrew</u> <div style="text-align: right;">[Electronically Filed]</div>			Date MM / DD / YYYY 10 / 17 / 2014		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 18 OF 37
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund		FEC IDENTIFICATION NUMBER ▼ C C00488742	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY			
Full Name of Payee National Association of REALTORS		Date of Public Distribution/Dissemination MM / DD / YYYYYY 09 / 15 / 2014	
Mailing Address 430 N Michigan Ave		Amount 100.00	
City Chicago	State IL	Zip Code 60611-4011	Transaction ID : EAB51F45492B04BD9895
Purpose of Expenditure Consulting Services		Category/Type 	Date of Disbursement or Obligation MM / DD / YYYYYY
Name of Federal Candidate Rep. Chris P. Gibson		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought 28600.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee JKM CONSULTING		Date of Public Distribution/Dissemination MM / DD / YYYYYY 09 / 15 / 2014	
Mailing Address 4441 Kingle St NW		Amount 26070.00	
City Washington	State DC	Zip Code 20016-3578	Transaction ID : ED36FC38E4E1B43CEBBI
Purpose of Expenditure Online video production costs		Category/Type 	Date of Disbursement or Obligation MM / DD / YYYYYY
Name of Federal Candidate Rep. Patrick E. Murphy		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>18</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought 29670.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		26170.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>Michael McGrew</u>		Date MM / DD / YYYYYY 10 / 17 / 2014	

[Electronically Filed]

Full Name of Payee National Association of REALTORS		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 15 / 2014	
Mailing Address 430 N Michigan Ave		Amount 100.00	
City Chicago	State IL	Zip Code 60611-4011	Transaction ID : E0278F557359642FDA22 Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Consulting Services		Category/ Type	
Name of Federal Candidate Rep. Patrick E. Murphy		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate
District: 18 State: FL		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought		29670.00	

(a) SUBTOTAL of Itemized Independent Expenditures.....	➤	3600.00
(b) SUBTOTAL of Unitemized Independent Expenditures	➤	
(c) TOTAL Independent Expenditures.....	➤	

Signature

Full Name of Payee 720 Strategies LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 15 / 2014	
Mailing Address 1111 19th St NW		Amount 3500.00	
City Washington	State DC	Zip Code 20036-3603	Transaction ID : E3064B4A5D4B34944BCF Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Website design costs		Category/ Type	
Name of Federal Candidate Rep. Chris P. Gibson		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 19 State: NY
Calendar Year-To-Date Per Election for Office Sought		28600.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	7000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 21 OF 37
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund			FEC IDENTIFICATION NUMBER ▼ C C00488742	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY				
Full Name of Payee Meath Media Group			Date of Public Distribution/Dissemination 09 / 15 / 2014	
Mailing Address 4441 Kingle St., NW			Amount 25020.00	
City Washington		State DC	Zip Code 20016-3578	
Purpose of Expenditure Online video production costs		Category/ Type 	Transaction ID : EECAF4D918BC641C196E Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Rep. Tom W. Reed II		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 23 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought 28620.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee National Association of REALTORS			Date of Public Distribution/Dissemination 09 / 15 / 2014	
Mailing Address 430 N Michigan Ave			Amount 100.00	
City Chicago		State IL	Zip Code 60611-4011	
Purpose of Expenditure Consulting Services		Category/ Type 	Transaction ID : E0D964273804244E9A2A Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Rep. Tom W. Reed II		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 23 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought 28620.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			25120.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶				
(c) TOTAL Independent Expenditures..... ▶				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Michael McGrew</i>		[Electronically Filed] Date 10 / 17 / 2014		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 22 OF 37
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund			FEC IDENTIFICATION NUMBER ▼ C C00488742		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY					
Full Name of Payee National Association of REALTORS			Date of Public Distribution/Dissemination MM / DD / YYYYYY 09 / 18 / 2014		
Mailing Address 430 N Michigan Ave			Amount 100.00		
City Chicago		State IL	Zip Code 60611-4011		Transaction ID : E27CBAAF8DEC8451D8B!
Purpose of Expenditure Consulting services		Category/Type 		Date of Disbursement or Obligation MM / DD / YYYYYY	
Name of Federal Candidate Sen. Mark Begich			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 28380.00			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► _____		
Full Name of Payee Strategic Partners & Media, Inc			Date of Public Distribution/Dissemination MM / DD / YYYYYY 09 / 18 / 2014		
Mailing Address PO Box 480			Amount 800000.00		
City Arnold		State MD	Zip Code 21012-0480		Transaction ID : E13D22BB3C2984182B47
Purpose of Expenditure TV Ad buy and Production Costs		Category/Type 		Date of Disbursement or Obligation MM / DD / YYYYYY	
Name of Federal Candidate Sen. Mitch McConnell			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 1775500.00			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....			800100.00		
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures.....					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Michael McGrew</u> <div style="text-align: right;">[Electronically Filed]</div>			Date MM / DD / YYYYYY 10 / 17 / 2014		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 23 OF 37
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund			FEC IDENTIFICATION NUMBER ▼ C C00488742		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY					
Full Name of Payee DDC Advocacy			Date of Public Distribution/Dissemination 09 / 18 / 2014		
Mailing Address 174 Waterfront St Ste 500			Amount 67000.00		
City Oxon Hill		State MD	Zip Code 20745-1161		Transaction ID : EF0275009D4B2482EB5F
Purpose of Expenditure MicroTargeting survey and research expenses		Category/Type 		Date of Disbursement or Obligation MM / DD / YYYYYY	
Name of Federal Candidate Sen. Mitch McConnell			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KY</u>
Calendar Year-To-Date Per Election for Office Sought 1775500.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Public Opinion Strategies, LLC			Date of Public Distribution/Dissemination 09 / 18 / 2014		
Mailing Address 214 N Fayette St			Amount 36000.00		
City Alexandria		State VA	Zip Code 22314-2433		Transaction ID : EEE90797098014EBB877
Purpose of Expenditure Polling expenses		Category/Type 		Date of Disbursement or Obligation MM / DD / YYYYYY	
Name of Federal Candidate Sen. Mitch McConnell			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KY</u>
Calendar Year-To-Date Per Election for Office Sought 1775500.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			103000.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Michael McGrew</u> <div style="text-align: right;">[Electronically Filed]</div>			Date 10 / 17 / 2014		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 24 OF 37
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund			FEC IDENTIFICATION NUMBER ▼ C C00488742		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">M M / D D / Y Y Y Y Y Y</div>					
Full Name of Payee Majority Strategies			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px;">09 / 18 / 2014</div>		
Mailing Address 135 Professional Dr Ste 104			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">871500.00</div>		
City Ponte Vedra Beach		State FL	Zip Code 32082-6277		Transaction ID : E3BDB7A378F6F4897A36
Purpose of Expenditure Direct mail costs		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div>	
Name of Federal Candidate Sen. Mitch McConnell			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border: 1px solid black; padding: 2px;">1775500.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► _____
Full Name of Payee JKM CONSULTING			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px;">09 / 18 / 2014</div>		
Mailing Address 4441 Kingle St NW			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">24780.00</div>		
City Washington		State DC	Zip Code 20016-3578		Transaction ID : E4CD5C973B6EE48A885F
Purpose of Expenditure Online video production costs		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div>	
Name of Federal Candidate Sen. Mark Begich			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border: 1px solid black; padding: 2px;">28380.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► _____
(a) SUBTOTAL of Itemized Independent Expenditures.....			<div style="display: inline-block; border: 1px solid black; padding: 2px;">896280.00</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures			<div style="display: inline-block; border: 1px solid black; padding: 2px;"></div>		
(c) TOTAL Independent Expenditures.....			<div style="display: inline-block; border: 1px solid black; padding: 2px;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Michael McGrew</u> <div style="text-align: right;">[Electronically Filed]</div>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">10 / 17 / 2014</div>		

Full Name of Payee National Association of REALTORS		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 18 / 2014	
Mailing Address 430 N Michigan Ave		Amount 400.00	
City Chicago	State IL	Zip Code 60611-4011	Transaction ID : EB7A68B1CAEAF4D6CB9 Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Consulting Services		Category/ Type	
Name of Federal Candidate Sen. Mitch McConnell		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: KY
Calendar Year-To-Date Per Election for Office Sought		1775500.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund			FEC IDENTIFICATION NUMBER ▼ C C00488742		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M / D D / Y Y Y Y Y Y </div>					
Full Name of Payee National Association of REALTORS			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M / D D / Y Y Y Y Y Y </div>		
Mailing Address 430 N Michigan Ave			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 09 / 18 / 2014 </div>		
City Chicago		State IL	Zip Code 60611-4011		Transaction ID : EF0374DEFE06846248F5
Purpose of Expenditure Consulting Services		Category/Type		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M / D D / Y Y Y Y Y Y </div>	
Name of Federal Candidate Sen. Mitch McConnell			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 1775500.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____
Full Name of Payee 720 Strategies LLC			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M / D D / Y Y Y Y Y Y </div>		
Mailing Address 1111 19th St NW			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 09 / 18 / 2014 </div>		
City Washington		State DC	Zip Code 20036-3603		Transaction ID : E3AD7472037F34F068CA
Purpose of Expenditure Website design costs		Category/Type		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M / D D / Y Y Y Y Y Y </div>	
Name of Federal Candidate Sen. Mark Begich			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 28380.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 4000.00 </div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> _____ </div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> _____ </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Michael McGrew</u>			[Electronically Filed]		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M / D D / Y Y Y Y Y Y </div>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund			FEC IDENTIFICATION NUMBER ▼ C C00488742		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY					
Full Name of Payee Fenn Communications Group			Date of Public Distribution/Dissemination MM / DD / YYYYYY 09 / 22 / 2014		
Mailing Address 2715 M St NW Ste 150			Amount 711600.00		
City Washington		State DC	Zip Code 20007-3733		
Purpose of Expenditure TV Ad & Production Costs		Category/ Type 		Transaction ID : E94592D5793684CE6B1A Date of Disbursement or Obligation MM / DD / YYYYYY	
Name of Federal Candidate Sen. Mark Begich			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: AK		
Calendar Year-To-Date Per Election for Office Sought 777280.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee National Association of REALTORS			Date of Public Distribution/Dissemination MM / DD / YYYYYY 09 / 22 / 2014		
Mailing Address 430 N Michigan Ave			Amount 400.00		
City Chicago		State IL	Zip Code 60611-4011		
Purpose of Expenditure Consulting Services		Category/ Type 		Transaction ID : E57BC3483BAAC47AE83f Date of Disbursement or Obligation MM / DD / YYYYYY	
Name of Federal Candidate Sen. Mark Begich			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: AK		
Calendar Year-To-Date Per Election for Office Sought 777280.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			712000.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Michael McGrew</u> <div style="text-align: right;">[Electronically Filed]</div>			Date MM / DD / YYYYYY 10 / 17 / 2014		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund			FEC IDENTIFICATION NUMBER ▼ C C00488742		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY					
Full Name of Payee Peter D Hart Research Associates Inc			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 22 / 2014		
Mailing Address 1724 Connecticut Ave NW			Amount 36900.00		
City Washington		State DC	Zip Code 20009-1103		
Purpose of Expenditure Polling Expenses		Category/Type 		Transaction ID : EB77978D919C44C44A0E Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Sen. Mark Begich			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK		
Calendar Year-To-Date Per Election for Office Sought 777280.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Fenn Communications Group			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 23 / 2014		
Mailing Address 2715 M St NW Ste 150			Amount 200000.00		
City Washington		State DC	Zip Code 20007-3733		
Purpose of Expenditure Internet Ad & Production Costs		Category/Type 		Transaction ID : E7F118D8B289B4C15901 Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Sen. Mark Begich			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK		
Calendar Year-To-Date Per Election for Office Sought 1388591.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			236900.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Michael McGrew</i>			Date MM / DD / YYYY 10 / 17 / 2014		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund			FEC IDENTIFICATION NUMBER ▼ C C00488742		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY					
Full Name of Payee National Association of REALTORS			Date of Public Distribution/Dissemination MM / DD / YYYYYY 09 / 23 / 2014		
Mailing Address 430 N Michigan Ave			Amount 400.00		
City Chicago	State IL	Zip Code 60611-4011	Transaction ID : E21BC746D860845E6BB6		
Purpose of Expenditure Consulting Services		Category/Type 	Date of Disbursement or Obligation MM / DD / YYYYYY		
Name of Federal Candidate Sen. Mark Begich		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK		
Calendar Year-To-Date Per Election for Office Sought		1388591.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Terris Barnes & Walters			Date of Public Distribution/Dissemination MM / DD / YYYYYY 09 / 23 / 2014		
Mailing Address 400 Montgomery St Ste 900			Amount 410911.00		
City San Francisco	State CA	Zip Code 94104-1223	Transaction ID : E4D2671FFA91B40EEB84		
Purpose of Expenditure Direct Mail Costs		Category/Type 	Date of Disbursement or Obligation MM / DD / YYYYYY		
Name of Federal Candidate Sen. Mark Begich		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK		
Calendar Year-To-Date Per Election for Office Sought		1388591.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			411311.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Michael McGrew</i>		[Electronically Filed]		Date MM / DD / YYYYYY 10 / 17 / 2014	

Full Name of Payee National Association of REALTORS		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>09 / 24 / 2014</div> </div>	
Mailing Address 430 N Michigan Ave		Amount <div> <div>800.00</div> </div>	
City Chicago	State IL	Zip Code 60611-4011	Transaction ID : EAB23A584FC934D3F8B5 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> </div>
Purpose of Expenditure Consulting services		Category/ Type <div> <div></div> </div>	
Name of Federal Candidate Rep. Joe J. Heck		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <div> <div>458800.00</div> </div>		District: 03 State: NV Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	<div>28800.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	<div></div>
(c) TOTAL Independent Expenditures.....	▶	<div></div>

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 31 OF 37
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00488742</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>					
Full Name of Payee Fenn Communications Group			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;">09</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;">24</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;">2014</div>		
Mailing Address 2715 M St NW Ste 150			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">346600.00</div>		
City Washington		State DC	Zip Code 20007-3733		Transaction ID : E40A4440C98324D269C7
Purpose of Expenditure TV Ad & Production costs		Category/ Type <div style="border: 1px solid black; display: inline-block; width: 60px; height: 20px;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>	
Name of Federal Candidate Rep. Patrick E. Murphy			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>18</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">406470.00</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee National Association of REALTORS			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;">09</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;">24</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;">2014</div>		
Mailing Address 430 N Michigan Ave			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">800.00</div>		
City Chicago		State IL	Zip Code 60611-4011		Transaction ID : E0DB871987AB64673BD4
Purpose of Expenditure Consulting Services		Category/ Type <div style="border: 1px solid black; display: inline-block; width: 60px; height: 20px;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>	
Name of Federal Candidate Rep. Patrick E. Murphy			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>18</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">406470.00</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">347400.00</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Michael McGrew</i>			Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;">10</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;">17</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;">2014</div> <div style="text-align: center;">[Electronically Filed]</div>		

Full Name of Payee Strategic Partners & Media, Inc		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>09 / 24 / 2014</div> </div>	
Mailing Address PO Box 480		Amount <div> <div>430000.00</div> </div>	
City Arnold	State MD	Zip Code 21012-0480	Transaction ID : E3310A78B827B44D5AEF Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> </div>
Purpose of Expenditure TV Ad buy and Production Costs		Category/ Type <div> <div></div> </div>	
Name of Federal Candidate Rep. Joe J. Heck		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate
		District: 03 State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div> <div>458800.00</div> </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶ 459400.00
(b) SUBTOTAL of Unitemized Independent Expenditures	▶
(c) TOTAL Independent Expenditures.....	▶

Signature

Full Name of Payee National Association of REALTORS		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>09 / 25 / 2014</div> </div>	
Mailing Address 430 N Michigan Ave		Amount <div> <div>200.00</div> </div>	
City Chicago	State IL	Zip Code 60611-4011	Transaction ID : E18CBE7A81A9A4D969F2 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> </div>
Purpose of Expenditure Consulting Services		Category/ Type	
Name of Federal Candidate Ryan Costello		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		<div> <div>682034.00</div> </div>	District: 06 State: PA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	25200.00
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund			FEC IDENTIFICATION NUMBER ▼ C C00488742		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			<div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div>		
Full Name of Payee Strategic Partners & Media, Inc			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 25 / 2014		
Mailing Address PO Box 480			Amount 346000.00		
City Arnold		State MD	Zip Code 21012-0480		Transaction ID : E4535739AF74D407298D
Purpose of Expenditure TV Ad buy and Production costs		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Ryan Costello			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 06 State: PA
Calendar Year-To-Date Per Election for Office Sought			682034.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee 720 Strategies LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 25 / 2014		
Mailing Address 1111 19th St NW			Amount 3500.00		
City Washington		State DC	Zip Code 20036-3603		Transaction ID : EAC1FEB5D19E04D0AB1
Purpose of Expenditure Website Design costs		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Rep. Joe J. Heck			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 03 State: NV
Calendar Year-To-Date Per Election for Office Sought			487300.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			349500.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Michael McGrew			Date MM / DD / YYYY 10 / 17 / 2014		[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 35 OF 37
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund			FEC IDENTIFICATION NUMBER ▼ C C00488742		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			<div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div>		
Full Name of Payee Terris Barnes & Walters			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 26 / 2014		
Mailing Address 400 Montgomery St Ste 900			Amount 308136.00		
City San Francisco		State CA	Zip Code 94104-1223		
Purpose of Expenditure Direct mail costs		Category/ Type		Transaction ID : EAE0D83B02B6D43AFA76 Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Rep. Patrick E. Murphy			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate			<input checked="" type="checkbox"/> House District: 18 State: FL		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
714606.00					
Full Name of Payee Majority Strategies			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 26 / 2014		
Mailing Address 135 Professional Dr Ste 104			Amount 244985.00		
City Ponte Vedra Beach		State FL	Zip Code 32082-6277		
Purpose of Expenditure Direct mail costs		Category/ Type		Transaction ID : E8EB3B504FFA145FCA8E Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Rep. Joe J. Heck			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate			<input checked="" type="checkbox"/> House District: 03 State: NV		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
732285.00					
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			553121.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Michael McGrew</u>			Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> 10 / 17 / 2014		
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 36 OF 37
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund		FEC IDENTIFICATION NUMBER ▼ C C00488742
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Strategic Partners & Media, Inc		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 26 / 2014
Mailing Address PO Box 480		Amount 94000.00
City Arnold	State MD	Zip Code 21012-0480
Purpose of Expenditure Internet Ad buy and production costs		Transaction ID : EE65804ECF5BE4C0F971 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Ryan Costello		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee National Association of REALTORS		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 30 / 2014
Mailing Address 430 N Michigan Ave		Amount 100.00
City Chicago	State IL	Zip Code 60611-4011
Purpose of Expenditure Consulting Services		Transaction ID : EE16FF94CC231494FB02 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Rep. Mike G. Fitzpatrick		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	94100.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Michael McGrew

[Electronically Filed]

Date

MM / DD / YYYY
10 / 17 / 2014

Signature

