

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

AMERICA'S NEXT GENERATION LLC D/B/A THE NEXT GENERATION

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="26104.94"/>	<input type="text" value="26104.94"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="5553.46"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="5789.21"/>	<input type="text" value="146231.71"/>
(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="11342.67"/>	<input type="text" value="172336.65"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="8955.42"/>	<input type="text" value="169949.40"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2387.25"/>	<input type="text" value="2387.25"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="80473.73"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

AMERICA'S NEXT GENERATION LLC D/B/A THE NEXT GENERATION

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).....	1420.00	20537.00
(ii) Unitemized	3619.21	124944.71
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5039.21	145481.71
(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)	5039.21	145481.71
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.).....	750.00	750.00
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))..... ▶	5789.21	146231.71
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5789.21	146231.71

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	8955.42	169949.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	8955.42	169949.40
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.....	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)) ..	8955.42	169949.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8955.42	169949.40

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)	5039.21	145481.71
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5039.21	145481.71
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	8955.42	169949.40
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	8955.42	169949.40

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
AMERICA'S NEXT GENERATION LLC D/B/A THE NEXT GENERATION

Full Name (Last, First, Middle Initial) A. Mr. Grady Bowen		Date of Receipt MM / DD / YYYY 08 / 26 / 2014 Transaction ID : SA11Al.109741
Mailing Address 5554 Overlook Cir		Amount of Each Receipt this Period 470.00
City Winston Salem	State NC	Zip Code 27105
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 470.00	

Full Name (Last, First, Middle Initial) B. Mr. Grady Bowen		Date of Receipt MM / DD / YYYY 08 / 26 / 2014 Transaction ID : SA11Al.109744
Mailing Address 5554 Overlook Cir		Amount of Each Receipt this Period 75.00
City Winston Salem	State NC	Zip Code 27105
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 545.00	

Full Name (Last, First, Middle Initial) C. Mr. John L Brandt		Date of Receipt MM / DD / YYYY 07 / 01 / 2014 Transaction ID : SA11Al.109455
Mailing Address 2129 12th Ave E		Amount of Each Receipt this Period 20.00
City Hibbing	State MN	Zip Code 55746
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional).....▶	145.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA'S NEXT GENERATION LLC D/B/A THE NEXT GENERATION

Full Name (Last, First, Middle Initial) A. Mr GREGORY A FISHER		Date of Receipt MM / DD / YYYY 07 / 28 / 2014 Transaction ID : SA11Al.109674
Mailing Address 6300 Shelley Rd		Amount of Each Receipt this Period 200.00
City Mendon	State OH	Zip Code 45862
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Crown Equipment Corp	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Greynell n Kent Richard		Date of Receipt MM / DD / YYYY 07 / 18 / 2014 Transaction ID : SA11Al.109646
Mailing Address Po Box 2195		Amount of Each Receipt this Period 300.00
City Rancho Santa Fe	State CA	Zip Code 92067
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Mr. Kenneth F. Spitler		Date of Receipt MM / DD / YYYY 08 / 20 / 2014 Transaction ID : SA11Al.109737
Mailing Address 9502 Bayou Brook St		Amount of Each Receipt this Period 500.00
City Houston	State TX	Zip Code 77063
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA'S NEXT GENERATION LLC D/B/A THE NEXT GENERATION

A. Mr. Jeffrey J. Tarrand
 Full Name (Last, First, Middle Initial)
 Mailing Address 4706 Braesvalley Dr
 City Houston State TX Zip Code 77096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Anderson Occupation Physicist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 02 / 2014
Transaction ID : SA11AI.109516
 Amount of Each Receipt this Period
 250.00
 Contribution

B. Mr. Jeffrey J. Tarrand
 Full Name (Last, First, Middle Initial)
 Mailing Address 4706 Braesvalley Dr
 City Houston State TX Zip Code 77096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Anderson Occupation Physicist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 02 / 2014
Transaction ID : SA11AI.109698
 Amount of Each Receipt this Period
 25.00
 Contribution

C.
 Full Name (Last, First, Middle Initial)
 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).....▶	275.00
TOTAL This Period (last page this line number only).....▶	1420.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 20
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA'S NEXT GENERATION LLC D/B/A THE NEXT GENERATION

A. Fred O. Burkhalter
Full Name (Last, First, Middle Initial)

Mailing Address The Alpin Center
7023 Mill Road

City Brecksville State OH Zip Code 44141

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

Name of Employer N/A Occupation N/A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
07 / 01 / 2014

Transaction ID : SA17.109786

Amount of Each Receipt this Period
300.00

Deposit used for last month rent(See Sch B)

B. US Post Office
Full Name (Last, First, Middle Initial)

Mailing Address 2 Massachusetts Ave NE

City Washington State DC Zip Code 20002

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2014

Transaction ID : SA17.109777

Amount of Each Receipt this Period
250.00

Postage Refund

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

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
MM / DD / YYYY

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	550.00

**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)

AMERICA'S NEXT GENERATION LLC D/B/A THE NEXT GENERATION

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address 200 Vesey Street

City New York State NY Zip Code 10285

Purpose of Disbursement
Discount Fee

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 07 / 2014

Transaction ID : SB21B.109753

Amount of Each Disbursement this Period

1.16

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 11190 Main Street

City Fairfax State VA Zip Code 22030

Purpose of Disbursement
Bank Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 07 / 2014

Transaction ID : SB21B.109754

Amount of Each Disbursement this Period

562.20

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 11190 Main Street

City Fairfax State VA Zip Code 22030

Purpose of Disbursement
Bank Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 07 / 2014

Transaction ID : SB21B.109757

Amount of Each Disbursement this Period

146.32

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

709.68

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S NEXT GENERATION LLC D/B/A THE NEXT GENERATION

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 11190 Main Street

City State Zip Code
Fairfax VA 22030

Purpose of Disbursement
Bank Fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.109748

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 11190 Main Street

City State Zip Code
Fairfax VA 22030

Purpose of Disbursement
Bank Fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.109749

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 11190 Main Street

City State Zip Code
Fairfax VA 22030

Purpose of Disbursement
Bank Fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.109769

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA'S NEXT GENERATION LLC D/B/A THE NEXT GENERATION

Full Name (Last, First, Middle Initial)

A. Fred O. Burkhalter

Mailing Address The Alpin Center
7023 Mill Road

City Brecksville State OH Zip Code 44141

Purpose of Disbursement
Rent deposit used for last month's rent

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.109787

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. First Merit Bank

Mailing Address 295 First Merit Circle

City Akron State OH Zip Code 44307

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.109755

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. First Merit Bank

Mailing Address 295 First Merit Circle

City Akron State OH Zip Code 44307

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.109750

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA'S NEXT GENERATION LLC D/B/A THE NEXT GENERATION

Full Name (Last, First, Middle Initial)

A. First Virginia Community Bank

Mailing Address 11325 Random Hills Road

City Fairfax State VA Zip Code 22030

Purpose of Disbursement
Bank Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.109752

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. First Virginia Community Bank

Mailing Address 11325 Random Hills Road

City Fairfax State VA Zip Code 22030

Purpose of Disbursement
Bank Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.109746

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. First Virginia Community Bank

Mailing Address 11325 Random Hills Road

City Fairfax State VA Zip Code 22030

Purpose of Disbursement
Bank Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.109767

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

AMERICA'S NEXT GENERATION LLC D/B/A THE NEXT GENERATION

Full Name (Last, First, Middle Initial)

A. Infocision Management Corporation

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
Voter Outreach/Advocacy Telemarketing

003

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 16 / 2014

Transaction ID : SB21B.109789

Amount of Each Disbursement this Period

4544.28

Full Name (Last, First, Middle Initial)

B. Infocision Management Corporation

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
Voter Outreach/Advocacy Telemarketing

003

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 30 / 2014

Transaction ID : SB21B.109790

Amount of Each Disbursement this Period

1748.96

Full Name (Last, First, Middle Initial)

C. Infocision Management Corporation

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
Administrative Fees

003

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 30 / 2014

Transaction ID : SB21B.109796

Amount of Each Disbursement this Period

67.35

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

6360.59

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

AMERICA'S NEXT GENERATION LLC D/B/A THE NEXT GENERATION

Full Name (Last, First, Middle Initial)

A. Infocision Management Corporation

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
Voter Advocacy/Outreach Fundraising Telemarketing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

003
Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 25 / 2014

Transaction ID : SB21B.109791

Amount of Each Disbursement this Period

720.38

Full Name (Last, First, Middle Initial)

B. The Illuminating Company

Mailing Address 76 South Main St

City Akron State OH Zip Code 44308

Purpose of Disbursement
Utilities

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 08 / 2014

Transaction ID : SB21B.109770

Amount of Each Disbursement this Period

42.16

Full Name (Last, First, Middle Initial)

C. The Illuminating Company

Mailing Address 76 South Main St

City Akron State OH Zip Code 44308

Purpose of Disbursement
Utilities

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 12 / 2014

Transaction ID : SB21B.109771

Amount of Each Disbursement this Period

43.34

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

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

805.88

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)

AMERICA'S NEXT GENERATION LLC D/B/A THE NEXT GENERATION

Full Name (Last, First, Middle Initial)

A. The Illuminating Company

Mailing Address 76 South Main St

City Akron State OH Zip Code 44308

Purpose of Disbursement
Utilities

001
Category/ Type

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		30		2014

Transaction ID : SB21B.109772

Amount of Each Disbursement this Period

38.45

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

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

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

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

Amount of Each Disbursement this Period

--

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

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

38.45

8789.82

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 17 OF 20
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
AMERICA'S NEXT GENERATION LLC D/B/A THE NEXT GENERATION

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Fred O. Burkhalter	Nature of Debt (Purpose): Rent Deposit
Mailing Address The Alpin Center 7023 Mill Road	
City State Zip Code Brecksville OH 44141	

Outstanding Balance Beginning This Period <input type="text" value="500.00"/>	Transaction ID : SD9.106947	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="500.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

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="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="0.00"/>
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 18 OF 20
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
AMERICA'S NEXT GENERATION LLC D/B/A THE NEXT GENERATION

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor George Anderson	Nature of Debt (Purpose): Accounting Services
Mailing Address 8748 Brecksville Road Suite 227	
City State Zip Code Brecksville OH 44141	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.109773	
Amount Incurred This Period 1000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor George Anderson	Nature of Debt (Purpose): Accounting Services
Mailing Address 8748 Brecksville Road Suite 227	
City State Zip Code Brecksville OH 44141	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.109774	
Amount Incurred This Period 5000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Infocision Management Corporation	Nature of Debt (Purpose): Voter Advocacy/Outreach Telemarketing
Mailing Address 325 SPRINGSIDE DRIVE	
City State Zip Code AKRON OH 44333	

Outstanding Balance Beginning This Period 10302.62	Transaction ID : SD10.107010	
Amount Incurred This Period 0.00	Payment This Period 7013.62	Outstanding Balance at Close of This Period 3289.00

1) SUBTOTALS This Period This Page (optional)..... ▶	9289.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 19 OF 20
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
AMERICA'S NEXT GENERATION LLC D/B/A THE NEXT GENERATION

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Infocision Management Corporation	Nature of Debt (Purpose): Voter Advocacy/Outreach Telemarketing
Mailing Address 325 SPRINGSIDE DRIVE	
City State Zip Code AKRON OH 44333	

Outstanding Balance Beginning This Period <input type="text" value="47372.05"/>	Transaction ID : SD10.107215	
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="47372.05"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Infocision Management Corporation	Nature of Debt (Purpose): Voter Advocacy/Outreach Telemarketing (Estimate)
Mailing Address 325 SPRINGSIDE DRIVE	
City State Zip Code AKRON OH 44333	

Outstanding Balance Beginning This Period <input type="text" value="17712.68"/>	Transaction ID : SD10.109446	
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="17712.68"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Paula Y. Edwards, CPA, MST, LLP	Nature of Debt (Purpose): Accounting/Compliance
Mailing Address 1200 G Street NW Suite 800	
City State Zip Code Washington DC 20005	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.109775	
Amount Incurred This Period <input type="text" value="6100.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="6100.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="71184.73"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="80473.73"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="80473.73"/>

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: SD10

Transaction ID : SD10.107215

This transaction represents the total amount of outstanding invoices owed to the vendor at 3/31/2014 and includes an estimate of work performed but unbilled at 3/31/2014. This estimate is based on historical performance and may be greater than or less than the actual amounts billed.

Form/Schedule: SD10

Transaction ID: SD10.109446

This transaction represents the total amount of outstanding invoices owed to the vendor at 6/30/2014 and includes an estimate of work performed but unbilled at 6/30/2014. This estimate is based on historical performance and may be greater than or less than the actual amounts billed.