

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation SUSAN B ANTHONY LIST INC		3. FEC Identification Number C C90011313
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1707 L Street NW Ste 750		
(c) City, State and ZIP Code Washington DC 20036		
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report
- July 15 Quarterly Report 24-Hour Report
- October 15 Quarterly Report 48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment? No Yes, it amends the report filed on

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

5. COVERING PERIOD:

FROM

M M M	/	D D D	/	Y Y Y Y Y Y
04		01		2014

THROUGH

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

6. TOTAL CONTRIBUTIONS.....	0.00
7. TOTAL INDEPENDENT EXPENDITURES	98197.98

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 any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

[Electronically Filed]

Robert Kania

Robert Kania

07/15/2014

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

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee ARKANSAS GRAPHICS, INC.		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 800 SOUTH GAINES		Amount 20819.16	
City LITTLE ROCK	State AR	Zip Code 72203	Transaction ID : F57.4282
Purpose of Expenditure MAILING	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 19
Name of Federal Candidate Supported or Opposed by Expenditure: LIZBETH BENACQUISTO		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 20831.64		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special-Primary	

Full Name (Last, First, Middle Initial) of Payee B&D Printing		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 521 Research Rd		Amount 47.46	
City North Chesterfield	State VA	Zip Code 23236	Transaction ID : F57.4286
Purpose of Expenditure PRINTING	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: AR District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: MARK LUNSFORD PRYOR		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7711.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee B&D Printing		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 521 Research Rd		Amount 47.46	
City North Chesterfield	State VA	Zip Code 23236	Transaction ID : F57.4287
Purpose of Expenditure PRINTING	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: KAY R HAGAN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 3885.66		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	20914.08
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee B&D Printing		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 521 Research Rd		Amount 47.46	
City North Chesterfield	State VA	Zip Code 23236	
Purpose of Expenditure PRINTING		Category/ Type	Office Sought: <input type="checkbox"/> House State: LA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MARY L LANDRIEU		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		3885.66	

Transaction ID : F57.4288

Full Name (Last, First, Middle Initial) of Payee B&D Printing		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 521 Research Rd		Amount 47.46	
City North Chesterfield	State VA	Zip Code 23236	
Purpose of Expenditure PRINTING		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JACKIE WALORSKI SWIHART		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		59.94	

Transaction ID : F57.4289

Full Name (Last, First, Middle Initial) of Payee B&D Printing		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 521 Research Rd		Amount 47.46	
City North Chesterfield	State VA	Zip Code 23236	
Purpose of Expenditure PRINTING		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 21 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: ELISE M STEFANIK		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		59.94	

Transaction ID : F57.4290

(a) SUBTOTAL of Itemized Independent Expenditures.....	142.38
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee B&D Printing		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 521 Research Rd		Amount 47.46	
City North Chesterfield	State VA	Zip Code 23236	Transaction ID : F57.4291
Purpose of Expenditure PRINTING	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: UT District: 04
Name of Federal Candidate Supported or Opposed by Expenditure: MIA LOVE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee B&D Printing		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 521 Research Rd		Amount 47.46	
City North Chesterfield	State VA	Zip Code 23236	Transaction ID : F57.4292
Purpose of Expenditure PRINTING	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: AZ District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: ANN KIRKPATRICK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee B&D Printing		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 521 Research Rd		Amount 47.46	
City North Chesterfield	State VA	Zip Code 23236	Transaction ID : F57.4293
Purpose of Expenditure PRINTING	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: AR District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: ANN V CLEMMER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	142.38
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee B&D Printing		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 521 Research Rd		Amount 47.46	
City North Chesterfield	State VA	Zip Code 23236	
Purpose of Expenditure PRINTING		Category/ Type	Transaction ID : F57.4294
Name of Federal Candidate Supported or Opposed by Expenditure: LIZBETH BENACQUISTO		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 19
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary

Full Name (Last, First, Middle Initial) of Payee B&D Printing		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 521 Research Rd		Amount 47.46	
City North Chesterfield	State VA	Zip Code 23236	
Purpose of Expenditure PRINTING		Category/ Type	Transaction ID : F57.4295
Name of Federal Candidate Supported or Opposed by Expenditure: DONNA HORTMAN SHELDON		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: GA District: 10
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee B&D Printing		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 521 Research Rd		Amount 47.46	
City North Chesterfield	State VA	Zip Code 23236	
Purpose of Expenditure PRINTING		Category/ Type	Transaction ID : F57.4296
Name of Federal Candidate Supported or Opposed by Expenditure: ANN MCLANE KUSTER		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NH District: 02
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	142.38
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee B&D Printing		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 521 Research Rd		Amount 47.46	
City North Chesterfield	State VA	Zip Code 23236	
Purpose of Expenditure PRINTING		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MARILINDA GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		119.88	

Full Name (Last, First, Middle Initial) of Payee B&D Printing		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 521 Research Rd		Amount 47.46	
City North Chesterfield	State VA	Zip Code 23236	
Purpose of Expenditure PRINTING		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NJ <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: AIMEE BELGARD		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		59.94	

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 106 North Collins Street		Amount 83.66	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Design work		Category/ Type	Office Sought: <input type="checkbox"/> House State: AR <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MARK LUNSFORD PRYOR		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		7795.04	

(a) SUBTOTAL of Itemized Independent Expenditures.....	178.58
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 106 North Collins Street		Amount 83.66	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Design work		Category/ Type	Transaction ID : F57.4300
Name of Federal Candidate Supported or Opposed by Expenditure: KAY R HAGAN		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 00
Calendar Year-To-Date Per Election for Office Sought		3969.32	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 106 North Collins Street		Amount 83.66	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Design work		Category/ Type	Transaction ID : F57.4301
Name of Federal Candidate Supported or Opposed by Expenditure: MARY L LANDRIEU		Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: LA District: 00
Calendar Year-To-Date Per Election for Office Sought		3969.32	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 106 North Collins Street		Amount 83.66	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Design work		Category/ Type	Transaction ID : F57.4302
Name of Federal Candidate Supported or Opposed by Expenditure: JACKIE WALORSKI SWIHART		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IN District: 02
Calendar Year-To-Date Per Election for Office Sought		143.60	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	250.98
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 106 North Collins Street		Amount 83.66	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Design work		Category/ Type	Transaction ID : F57.4303
Name of Federal Candidate Supported or Opposed by Expenditure: ELISE M STEFANIK		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NY District: 21
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		2014	

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 106 North Collins Street		Amount 83.66	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Design work		Category/ Type	Transaction ID : F57.4304
Name of Federal Candidate Supported or Opposed by Expenditure: MIA LOVE		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: UT District: 04
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		2014	

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 106 North Collins Street		Amount 83.66	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Design work		Category/ Type	Transaction ID : F57.4305
Name of Federal Candidate Supported or Opposed by Expenditure: ANN KIRKPATRICK		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: AZ District: 01
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		2014	

(a) SUBTOTAL of Itemized Independent Expenditures.....	250.98
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 106 North Collins Street		Amount 83.66	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Design work		Category/ Type	Transaction ID : F57.4306
Name of Federal Candidate Supported or Opposed by Expenditure: ANN V CLEMMER		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: AR District: 02
Calendar Year-To-Date Per Election for Office Sought		143.60	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 106 North Collins Street		Amount 83.66	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Design work		Category/ Type	Transaction ID : F57.4307
Name of Federal Candidate Supported or Opposed by Expenditure: LIZBETH BENACQUISTO		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 19
Calendar Year-To-Date Per Election for Office Sought		41241.68	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 106 North Collins Street		Amount 83.66	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Design work		Category/ Type	Transaction ID : F57.4308
Name of Federal Candidate Supported or Opposed by Expenditure: DONNA HORTMAN SHELDON		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: GA District: 10
Calendar Year-To-Date Per Election for Office Sought		143.60	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	250.98
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 106 North Collins Street		Amount 83.66	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Design work		Category/ Type	Transaction ID : F57.4309
Name of Federal Candidate Supported or Opposed by Expenditure: ANN MCLANE KUSTER		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NH District: 02
Calendar Year-To-Date Per Election for Office Sought		203.54	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 106 North Collins Street		Amount 83.66	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Design work		Category/ Type	Transaction ID : F57.4310
Name of Federal Candidate Supported or Opposed by Expenditure: MARILINDA GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NH District: 02
Calendar Year-To-Date Per Election for Office Sought		287.20	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 106 North Collins Street		Amount 83.66	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Design work		Category/ Type	Transaction ID : F57.4311
Name of Federal Candidate Supported or Opposed by Expenditure: AIMEE BELGARD		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 03
Calendar Year-To-Date Per Election for Office Sought		143.60	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	250.98
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination 04 / 15 / 2014	
Mailing Address 106 North Collins Street		Amount 1429.00	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Design work, originally reported as \$1426		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 19 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: LIZBETH BENACQUISTO		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special-Primary	

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination 05 / 14 / 2014	
Mailing Address 106 North Collins Street		Amount 517.74	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Mailings		Category/ Type 003	Office Sought: <input checked="" type="checkbox"/> House State: UT <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MIA LOVE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination 05 / 14 / 2014	
Mailing Address 106 North Collins Street		Amount 517.74	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Mailing		Category/ Type 003	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 21 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: ELISE M STEFANIK		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2464.48
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination 05 / 14 / 2014	
Mailing Address 106 North Collins Street		Amount 517.74	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Mailing		Category/ Type 003	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JONI K ERNST		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		Transaction ID : F57.4341	

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination 05 / 14 / 2014	
Mailing Address 106 North Collins Street		Amount 517.74	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Mailing		Category/ Type 003	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 45 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MIMI WALTERS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		Transaction ID : F57.4342	

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination 05 / 14 / 2014	
Mailing Address 106 North Collins Street		Amount 517.74	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Mailing		Category/ Type 003	Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: WENDY ROGERS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		Transaction ID : F57.4344	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1553.22
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 106 North Collins Street		Amount 517.74	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Mailing		Category/ Type 003	Transaction ID : F57.4346
Name of Federal Candidate Supported or Opposed by Expenditure: MARILINDA GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NH District: 02
Calendar Year-To-Date Per Election for Office Sought		517.74	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	2014 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 106 North Collins Street		Amount 517.74	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Mailing		Category/ Type 003	Transaction ID : F57.4347
Name of Federal Candidate Supported or Opposed by Expenditure: KAREN CHRISTINE HANDEL		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: GA District: _____
Calendar Year-To-Date Per Election for Office Sought		517.74	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	2014 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 106 North Collins Street		Amount 517.74	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Mailing		Category/ Type 003	Transaction ID : F57.4348
Name of Federal Candidate Supported or Opposed by Expenditure: TRICIA PRIDEMORE		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: GA District: 11
Calendar Year-To-Date Per Election for Office Sought		517.74	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2014 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	1553.22
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination 05 / 14 / 2014	
Mailing Address 106 North Collins Street		Amount 517.74	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Mailing		Category/ Type 003	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: MARK LUNSFORD PRYOR		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 8312.78		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination 05 / 14 / 2014	
Mailing Address 106 North Collins Street		Amount 517.74	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Mailing		Category/ Type 003	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: KAY R HAGAN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4487.06		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date of Public Distribution/Dissemination 05 / 14 / 2014	
Mailing Address 106 North Collins Street		Amount 517.74	
City Plant City	State FL	Zip Code 33563	
Purpose of Expenditure Mailing		Category/ Type 003	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: MARY L LANDRIEU		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4487.06		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1553.22
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee DRUMMOND PRESS		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 15 / 2014	
Mailing Address 2472 DENNIS STREET		Amount 20278.92	
City JACKSONVILLE	State FL	Zip Code 32204	Transaction ID : F57.4284
Purpose of Expenditure MAILING, originally filed as \$23,716.62	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 19
Name of Federal Candidate Supported or Opposed by Expenditure: LIZBETH BENACQUISTO		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 41110.56		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	

Full Name (Last, First, Middle Initial) of Payee FP1 Strategies, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 23 / 2014	
Mailing Address P.O. Box 16504		Amount 35021.00	
City Alexandria	State VA	Zip Code 22302	Transaction ID : F57.4336
Purpose of Expenditure Ads Production	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District:
Name of Federal Candidate Supported or Opposed by Expenditure: KAY R HAGAN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 39508.06		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Third Dimension Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 15 / 2014	
Mailing Address 14524 Cantell Rd, Ste 140		Amount 3278.62	
City Little Rock	State AR	Zip Code 72223	Transaction ID : F57.4317
Purpose of Expenditure Robocalls, originally filed as \$5600	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 19
Name of Federal Candidate Supported or Opposed by Expenditure: LIZBETH BENACQUISTO		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 44520.30		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	

(a) SUBTOTAL of Itemized Independent Expenditures.....	58578.54
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Tigre Strategic		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 30 / 2014	
Mailing Address 4820 W San Jose St		Amount 2154.08	
City Tampa	State FL	Zip Code 33629	Transaction ID : F57.4331
Purpose of Expenditure Robocalls-Originally reported as \$1915, amended report 6/13/14		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JONI K ERNST		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) _____	
		2671.82	

Full Name (Last, First, Middle Initial) of Payee Victory Phones		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 17 / 2014	
Mailing Address 190 Monroe NW Fifth Floor		Amount 7817.50	
City Grand Rapids	State MI	Zip Code 49503	Transaction ID : F57.4326
Purpose of Expenditure Robo-calls, originally reported as \$7500		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: GA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: KAREN CHRISTINE HANDEL		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) _____	
		8335.24	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	9971.58
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	98197.98