

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Bold Agenda PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="255000.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="315000.00"/>	<input type="text" value="570000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="570000.00"/>	<input type="text" value="570000.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="568328.78"/>	<input type="text" value="568328.78"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1671.22"/>	<input type="text" value="1671.22"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Bold Agenda PAC

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).....	315000.00	570000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	315000.00	570000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	315000.00	570000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	315000.00	570000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	315000.00	570000.00

DETAILED SUMMARY PAGE

of Disbursements

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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	40068.78	40068.78
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	40068.78	40068.78
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)	256485.00	256485.00
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	271775.00	271775.00
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)) ..	568328.78	568328.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	568328.78	568328.78

DETAILED SUMMARY PAGE
of Disbursements

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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)	315000.00	570000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	315000.00	570000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	40068.78	40068.78
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	40068.78	40068.78

**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 12
<input checked="" 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 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)
Bold Agenda PAC

Full Name (Last, First, Middle Initial)
A. AMERICANS FOR SHARED PROSPERITY

Mailing Address 3000 K ST NW STE 600

City WASHINGTON	State DC	Zip Code 20007
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2014

Transaction ID : SA11AI.4135

Amount of Each Receipt this Period
50000.00

Full Name (Last, First, Middle Initial)
B. AMERICANS FOR SHARED PROSPERITY

Mailing Address 3000 K ST NW STE 600

City WASHINGTON	State DC	Zip Code 20007
--------------------	-------------	-------------------

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2014

Transaction ID : SA11AI.4137

Amount of Each Receipt this Period
15000.00

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

Mailing Address Alexander Valley Road

City Healdsburg	State CA	Zip Code 95448
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FEC ID number of contributing federal political committee. **C**

Name of Employer Jordan Winery	Occupation CEO
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250000.00

Date of Receipt

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

Transaction ID : SA11AI.4112

Amount of Each Receipt this Period
250000.00

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶	315000.00
TOTAL This Period (last page this line number only).....▶	315000.00

**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)
Bold Agenda PAC

Full Name (Last, First, Middle Initial)

A. Evolution Media

Mailing Address 308 McDaniel Street

City Tallahassee State FL Zip Code 32303

Purpose of Disbursement
Film & Production, Non-Political Issue Ad, 'Agenda'

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 22 / 2014

Transaction ID : SB21B.4152

Amount of Each Disbursement this Period

13705.00

Full Name (Last, First, Middle Initial)

B. Intrepid Media

Mailing Address 210 Mill Branch Rd

City Tallahassee State FL Zip Code 32312

Purpose of Disbursement
Creative Fee - Non Political Issue Ad, 'Agenda'

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2014

Transaction ID : SB21B.4147

Amount of Each Disbursement this Period

25000.00

Full Name (Last, First, Middle Initial)

C. Ward & Lawless LLC

Mailing Address 382 Chester Drive

City Cocoa State FL Zip Code 32926

Purpose of Disbursement
PAC Administration, Compliance & Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 19 / 2014

Transaction ID : SB21B.4139

Amount of Each Disbursement this Period

1155.00

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

39860.00

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

39860.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bold Agenda PAC

Full Name (Last, First, Middle Initial)

A. AMERICANS FOR SHARED PROSPERITY

Date of Disbursement

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

Mailing Address 3000 K ST NW STE 600

Transaction ID : SB29.4138

City WASHINGTON State DC Zip Code 20007

Amount of Each Disbursement this Period

1200.00

Purpose of Disbursement
Contribution to 501 (C) organization

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. IMGE LLC

Date of Disbursement

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

Mailing Address 603 King Street, 4th Floor

Transaction ID : SB29.4145

City Alexandria State VA Zip Code 22314

Amount of Each Disbursement this Period

50000.00

Purpose of Disbursement
Non-Political Issue Ad, 'Agenda,' Media Purchase

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. IMGE LLC

Date of Disbursement

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

Mailing Address 603 King Street, 4th Floor

Transaction ID : SB29.4148

City Alexandria State VA Zip Code 22314

Amount of Each Disbursement this Period

50000.00

Purpose of Disbursement
Non-Political Issue Ad, 'Agenda,' Additional Media Purchase

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

101200.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Bold Agenda PAC

Full Name (Last, First, Middle Initial)

A. IMGE LLC

Mailing Address 603 King Street, 4th Floor

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Non-Political Issue Ad, 'Agenda,' Additional Media Purchase

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
10 / 23 / 2014

Transaction ID : SB29.4153

Amount of Each Disbursement this Period

25000.00

Full Name (Last, First, Middle Initial)

B. Smart Media Group

Mailing Address 1427 Leslie Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement
Non-Political Issue Advertising 'Agenda'

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
10 / 16 / 2014

Transaction ID : SB29.4143

Amount of Each Disbursement this Period

145575.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

170575.00

271775.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Bold Agenda PAC	FEC IDENTIFICATION NUMBER ▼ C C00569426
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee Del Cielo Media LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 17 / 2014
Mailing Address 1427 Leslie Avenue #102	Amount 50000.00
City Alexandria State VA Zip Code 22301	Transaction ID : SE.4114 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 17 / 2014
Purpose of Expenditure Broadcast Media Flight 10/17-10/23 'SERVICE'	Category/Type 004
Name of Federal Candidate ELAN S. CARR	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 33 State: CA
Calendar Year-To-Date Per Election for Office Sought 50000.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Del Cielo Media LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 17 / 2014
Mailing Address 1427 Leslie Avenue #102	Amount 200000.00
City Alexandria State VA Zip Code 22301	Transaction ID : SE.4117 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 17 / 2014
Purpose of Expenditure Cable Media Flight 10/17-10/23 'SERVICE'	Category/Type 004
Name of Federal Candidate ELAN S. CARR	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 33 State: CA
Calendar Year-To-Date Per Election for Office Sought 250000.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	250000.00
(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.

Candace Hermsmeyer [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 12 / 02 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Bold Agenda PAC	FEC IDENTIFICATION NUMBER ▼ C C00569426
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee Del Cielo Media LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 17 / 2014
Mailing Address 1427 Leslie Avenue #102	Amount 25.00
City Alexandria State VA Zip Code 22301	Transaction ID : SE.4125 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 17 / 2014
Purpose of Expenditure Wire Service 'SERVICE' Category/Type 004	Name of Federal Candidate ELAN S. CARR <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 33 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 253885.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Del Cielo Media LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 17 / 2014
Mailing Address 1427 Leslie Avenue #102	Amount 500.00
City Alexandria State VA Zip Code 22301	Transaction ID : SE.4126 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 17 / 2014
Purpose of Expenditure Shipping Fee 'SERVICE' Category/Type 004	Name of Federal Candidate ELAN S. CARR <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 33 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 254385.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	525.00
(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.

Candace Hermsmeyer [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
12 / 02 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Bold Agenda PAC	FEC IDENTIFICATION NUMBER ▼ C C00569426
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y	

Full Name of Payee Del Cielo Media LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 1427 Leslie Avenue #102	Amount 2100.00
City State Zip Code Alexandria VA 22301	Transaction ID : SE.4127 Date of Disbursement or Obligation M M / D D / Y Y Y Y 10 / 17 / 2014
Purpose of Expenditure Extreme Reach 'SERVICE'	Category/Type 004
Name of Federal Candidate ELAN S. CARR	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 33 <input type="checkbox"/> President State: CA
Calendar Year-To-Date Per Election for Office Sought 256485.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Intrepid Media	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 210 Mill Branch Rd	Amount 3860.00
City State Zip Code Tallahassee FL 32312	Transaction ID : SE.4120 Date of Disbursement or Obligation M M / D D / Y Y Y Y 10 / 17 / 2014
Purpose of Expenditure Footage License, edit time, voiceover, music rights, revisions'SERVICE'	Category/Type 004
Name of Federal Candidate ELAN S. CARR	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 33 <input type="checkbox"/> President State: CA
Calendar Year-To-Date Per Election for Office Sought 253860.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	5960.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	256485.00

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

Candace Hermsmeyer [Electronically Filed] Date M M / D D / Y Y Y Y 12 / 02 / 2014

Signature _____