

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Civic Innovation USA Inc

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="116373.56"/>	<input type="text" value="116373.56"/>
(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="116373.56"/>	<input type="text" value="116373.56"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="111356.82"/>	<input type="text" value="111356.82"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="5016.74"/>	<input type="text" value="5016.74"/>
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Civic Innovation USA Inc

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2014 To: M M / D D / Y Y Y Y 03 / 31 / 2014

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).....	5000.00	5000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5000.00	5000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	111373.56	111373.56
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	116373.56	116373.56
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))..... ▶	116373.56	116373.56
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	116373.56	116373.56

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	62411.01	62411.01
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	62411.01	62411.01
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)	48945.81	48945.81
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)) ..	111356.82	111356.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	111356.82	111356.82

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)	116373.56	116373.56
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	116373.56	116373.56
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	62411.01	62411.01
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	62411.01	62411.01

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

Form/Schedule: F3XA
Transaction ID :

Regarding this amended report and the May 6, 2014 RFAI letter from the Reports Analysis Division, the original Schedule E entry for the independent expenditure mailers against candidate Rodney L Davis inadvertently listed February 28, 2014 as the dissemination date. In fact, that was an estimated date of last receipt of the mailers by the intended audience. The actual dissemination dates for reporting purposes were February 20 and February 24, when the mailers were "relinquished to the United States Postal Service." 11 CFR 104.5(g)(4). Accordingly, no 24-hour report was due for this independent expenditure.

Form/Schedule:
Transaction ID:

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

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

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

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

NAME OF COMMITTEE (In Full)
Civic Innovation USA Inc

A. Full Name (Last, First, Middle Initial)
William J Robinson

Mailing Address 1730 Rhode Island Ave NW

City Washington State DC Zip Code 20036

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

Name of Employer William J Robinson Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2014

Transaction ID : SA11AI.4109

Amount of Each Receipt this Period
5000.00

Grant from Will Robinson

B. 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

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).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

**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 8 OF 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)
Civic Innovation USA Inc

Full Name (Last, First, Middle Initial) A. MoveOn.org Political Action		Date of Receipt
Mailing Address PO Box 9218		<input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
Berkeley	CA	94709
FEC ID number of contributing federal political committee.		Transaction ID : SA11C.4123
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00341396"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="10000.00"/>
Occupation		First grant
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="10000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MoveOn.org Political Action		Date of Receipt
Mailing Address PO Box 9218		<input type="text" value="02"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code
Berkeley	CA	94709
FEC ID number of contributing federal political committee.		Transaction ID : SA11C.4125
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00341396"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="46144.00"/>
Occupation		Second grant
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="56144.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MoveOn.org Political Action		Date of Receipt
Mailing Address PO Box 9218		<input type="text" value="02"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
Berkeley	CA	94709
FEC ID number of contributing federal political committee.		Transaction ID : SA11C.4165
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00341396"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="10000.00"/>
Occupation		Third grant
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="66144.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="66144.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

**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 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)
Civic Innovation USA Inc

Full Name (Last, First, Middle Initial) A. MoveOn.org Political Action		Date of Receipt
Mailing Address PO Box 9218		<input type="text" value="03"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code
Berkeley	CA	94709
FEC ID number of contributing federal political committee.		Transaction ID : SA11C.4126
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="19601.81"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Third grant
Aggregate Year-to-Date ▼		<input type="text" value="85745.81"/>

Full Name (Last, First, Middle Initial) B. MoveOn.org Political Action		Date of Receipt
Mailing Address PO Box 9218		<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
Berkeley	CA	94709
FEC ID number of contributing federal political committee.		Transaction ID : SA11C.4127
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="25627.75"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Fourth grant
Aggregate Year-to-Date ▼		<input type="text" value="111373.56"/>

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
Name of Employer		<input type="text"/>
Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		<input type="text"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="45229.56"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="111373.56"/>

**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)
Civic Innovation USA Inc

Full Name (Last, First, Middle Initial)

A. AMM Political Strategies

Mailing Address 507 North Sylvania

City Fort Worth State TX Zip Code 76111

Purpose of Disbursement
Telephone polling

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4186

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Analyst Institute LLC

Mailing Address 815 16th St NW
Floor 7

City Washington State DC Zip Code 20006

Purpose of Disbursement
Data & analytics consulting

Category/
Type

Candidate Name

Civic Innovation USA Inc

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4143

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Analyst Institute LLC

Mailing Address 815 16th St NW
Floor 7

City Washington State DC Zip Code 20006

Purpose of Disbursement
Data & Analytics consulting

Category/
Type

Candidate Name

Civic Innovation USA Inc

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4154

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)
Civic Innovation USA Inc

Full Name (Last, First, Middle Initial)

A. Analyst Institute LLC

Mailing Address 815 16th St NW
Floor 7

City Washington State DC Zip Code 20006

Purpose of Disbursement
Data & Analytics services

005

Category/
Type

Candidate Name

Civic Innovation USA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		26		2014

Transaction ID : SB21B.4162

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Catalyst LLC

Mailing Address 1090 Vermont Ave NW
Suite 300

City Washington State DC Zip Code 20005

Purpose of Disbursement
Data services

005

Category/
Type

Candidate Name

Civic Innovation USA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Transaction ID : SB21B.4156

Amount of Each Disbursement this Period

1200.00

Full Name (Last, First, Middle Initial)

C. Corporation Services Company

Mailing Address 2711 Centerville Road
Suite 400

City Wilmington State DE Zip Code 19808

Purpose of Disbursement
incorporation fees

001

Category/
Type

Candidate Name

Civic Innovation USA Inc

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
01		21		2014

Transaction ID : SB21B.4134

Amount of Each Disbursement this Period

633.26

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

6833.26

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Civic Innovation USA Inc

Full Name (Last, First, Middle Initial)

A. Tate Hausman Consulting

Mailing Address 110 Livingston St
#2B

City Brooklyn State NY Zip Code 11201

Purpose of Disbursement
Director salary

Category/
Type

Candidate Name

Civic Innovation USA Inc

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.4137

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Trister Ross Schadler & Gold

Mailing Address 1666 Connecticut Ave NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
legal services

Category/
Type

Candidate Name

Civic Innovation USA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.4160

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

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

/ /

Amount of Each Disbursement this Period

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

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

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Civic Innovation USA Inc	FEC IDENTIFICATION NUMBER ▼ C C00550566
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 Winning Mark LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 1220 SW Morrison St	Amount 6118.23
City Portland State OR Zip Code 97205	Transaction ID : SE.4166
Purpose of Expenditure Mailing opposing Sean Duffy	Date of Disbursement or Obligation M M / D D / Y Y Y Y 02 / 19 / 2014
Name of Federal Candidate SEAN DUFFY	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 6118.23	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Winning Mark LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 1220 SW Morrison St	Amount 6118.23
City Portland State OR Zip Code 97205	Transaction ID : SE.4168
Purpose of Expenditure Mailing opposing Joe Pitts	Date of Disbursement or Obligation M M / D D / Y Y Y Y 02 / 19 / 2014
Name of Federal Candidate JOSEPH R. PITTS	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 16 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 6118.23	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	12236.46
(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.

Daniel Hausman
Signature

[Electronically Filed] Date M M / D D / Y Y Y Y
05 / 13 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Civic Innovation USA Inc	FEC IDENTIFICATION NUMBER ▼ C C00550566
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 Winning Mark LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 28 / 2014
Mailing Address 1220 SW Morrison St	Amount 6118.22
City Portland State OR Zip Code 97205	Transaction ID : SE.4170 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 19 / 2014
Purpose of Expenditure Mailing opposing Frank LoBiondo	Category/Type 004
Name of Federal Candidate FRANK A. LOBIONDO	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought 6118.22	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Winning Mark LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 28 / 2014
Mailing Address 1220 SW Morrison St	Amount 6118.23
City Portland State OR Zip Code 97205	Transaction ID : SE.4172 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 19 / 2014
Purpose of Expenditure Mailing opposing Tom Reed	Category/Type 004
Name of Federal Candidate THOMAS W II REED	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 23 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY
Calendar Year-To-Date Per Election for Office Sought 6118.23	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	12236.45
(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.

Daniel Hausman [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
05 / 13 / 2014

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Civic Innovation USA Inc		FEC IDENTIFICATION NUMBER C C00550566
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Winning Mark LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 28 / 2014
Mailing Address 1220 SW Morrison St		Amount 6118.22
City Portland	State OR	Zip Code 97205
Purpose of Expenditure Mailing opposing Mike Coffman	Category/Type 004	Transaction ID : SE.4174 Date of Disbursement or Obligation MM / DD / YYYY 02 / 19 / 2014
Name of Federal Candidate MICHAEL COFFMAN	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought	6118.22	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Winning Mark LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 28 / 2014
Mailing Address 1220 SW Morrison St		Amount 6118.23
City Portland	State OR	Zip Code 97205
Purpose of Expenditure Mailing opposing Dave Reichert	Category/Type 004	Transaction ID : SE.4176 Date of Disbursement or Obligation MM / DD / YYYY 02 / 19 / 2014
Name of Federal Candidate DAVE REICHERT	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>08</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WA</u>
Calendar Year-To-Date Per Election for Office Sought	6118.23	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	12236.45
(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.

Daniel Hausman
Signature

[Electronically Filed]

Date MM / DD / YYYY
05 / 13 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Civic Innovation USA Inc	FEC IDENTIFICATION NUMBER ▼ C C00550566
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 Winning Mark LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 28 / 2014
Mailing Address 1220 SW Morrison St	Amount 6118.23
City Portland State OR Zip Code 97205	Transaction ID : SE.4178 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 19 / 2014
Purpose of Expenditure Mailing opposing Scott Rigell Category/Type 004	Name of Federal Candidate EDWARD SCOTT MR. RIGELL <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>
Calendar Year-To-Date Per Election for Office Sought 6118.23	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Winning Mark LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 20 / 2014
Mailing Address 1220 SW Morrison St	Amount 3059.11
City Portland State OR Zip Code 97205	Transaction ID : SE.4180 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 19 / 2014
Purpose of Expenditure Mailing opposing Rodney Davis Category/Type 004	Name of Federal Candidate RODNEY L DAVIS <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>13</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IL</u>
Calendar Year-To-Date Per Election for Office Sought 3059.11	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	9177.34
(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.

Daniel Hausman [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
05 / 13 / 2014

Signature

