

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Kelly Lawler

Signature of Treasurer Kelly Lawler [Electronically Filed] Date  /  /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Gen Equity Federal 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="53894.86"/>	<input type="text" value="53894.86"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="62672.2"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="2500"/>	<input type="text" value="22232.62"/>
(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="65172.2"/>	<input type="text" value="76127.48"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6421.93"/>	<input type="text" value="17377.21"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="58750.27"/>	<input type="text" value="58750.27"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0"/>	

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

**Gen Equity Federal 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).....	2200	11225
(ii) Unitemized .....	300	700
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2500	11925
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	2500	11925
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received .....	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	10000
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	307.62
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5) .....	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	2500	22232.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2500	22232.62

**DETAILED SUMMARY PAGE**  
of Disbursements

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	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures .....	3921.93	7877.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3921.93	7877.21
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500	9500
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0	0
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements .....	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6421.93	17377.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6421.93	17377.21

**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) .....	2500	11925
34. Total Contribution Refunds (from Line 28(d)) .....	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2500	11925
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3921.93	7877.21
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3921.93	7877.21

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

Form/Schedule: F3XN  
Transaction ID :

Our committee has low administrative costs.

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 18  
(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)  
**Gen Equity Federal PAC**

Full Name (Last, First, Middle Initial)  
**A. Brent R Frei**

Mailing Address 302 Parkridge Lane

City State Zip Code  
Bellevue WA 98004-6716

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

Name of Employer Occupation  
Smartsheet Chairman

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 30 / 2014  
**Transaction ID : 2844-24165-c**

Amount of Each Receipt this Period  
1000

Full Name (Last, First, Middle Initial)  
**B. Lawrence Hsu**

Mailing Address 943 Malcolm Avenue

City State Zip Code  
Los Angeles CA 90024-3113

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

Name of Employer Occupation  
Hsu International, Inc. COO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 08 / 2014  
**Transaction ID : 2576-24141-c**

Amount of Each Receipt this Period  
100

Full Name (Last, First, Middle Initial)  
**C. Lawrence Hsu**

Mailing Address 943 Malcolm Avenue

City State Zip Code  
Los Angeles CA 90024-3113

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

Name of Employer Occupation  
Hsu International, Inc. COO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 04 / 2014  
**Transaction ID : 2576-24167-c**

Amount of Each Receipt this Period  
100

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1200.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 18  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Gen Equity Federal PAC**

Full Name (Last, First, Middle Initial)  
**A. Lawrence Hsu**

Mailing Address 943 Malcolm Avenue

City Los Angeles    State CA    Zip Code 90024-3113

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

Name of Employer Hsu International, Inc.    Occupation COO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 02 / 2014**

**Transaction ID : 2576-24200-c**

Amount of Each Receipt this Period  
**100**

Full Name (Last, First, Middle Initial)  
**B. Seth Michael MacDonald Stodder**

Mailing Address 1714 Morgan Lane

City Redondo Beach    State CA    Zip Code 90278-4725

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

Name of Employer Obagi & Stodder LLP    Occupation Lawyer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 22 / 2014**

**Transaction ID : 3310-24163-c**

Amount of Each Receipt this Period  
**100**

Full Name (Last, First, Middle Initial)  
**C. Seth Michael MacDonald Stodder**

Mailing Address 1714 Morgan Lane

City Redondo Beach    State CA    Zip Code 90278-4725

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

Name of Employer Obagi & Stodder LLP    Occupation Lawyer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 19 / 2014**

**Transaction ID : 3310-24168-c**

Amount of Each Receipt this Period  
**100**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **300.00**

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



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

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

FOR LINE NUMBER: PAGE 9 OF 18  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Gen Equity Federal PAC**

**A. Seth Michael MacDonald Stodder**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1714 Morgan Lane  
 City Redondo Beach State CA Zip Code 90278-4725  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Obagi & Stodder LLP Occupation Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **900**

Date of Receipt **09 / 19 / 2014**  
**Transaction ID : 3310-24201-c**  
 Amount of Each Receipt this Period **100**

**B. Todd Rustman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 30882 Via Ultimo  
 City San Juan Capistrano State CA Zip Code 92675-1760  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GRCAM/Levendi/Settlement Masters Occupation Business Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **800**

Date of Receipt **07 / 01 / 2014**  
**Transaction ID : 1079-24176-c**  
 Amount of Each Receipt this Period **100**

**C. Todd Rustman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 30882 Via Ultimo  
 City San Juan Capistrano State CA Zip Code 92675-1760  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GRCAM/Levendi/Settlement Masters Occupation Business Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **800**

Date of Receipt **07 / 31 / 2014**  
**Transaction ID : 1079-24177-c**  
 Amount of Each Receipt this Period **100**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **300.00**  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 10 OF 18  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Gen Equity Federal PAC**

Full Name (Last, First, Middle Initial)  
**A. Todd Rustman**

Mailing Address 30882 Via Ultimo

City San Juan Capistrano    State CA    Zip Code 92675-1760

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

Name of Employer: GRCAM/Levendi/Settlement Masters    Occupation: Business Owner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 01 / 2014**

**Transaction ID : 1079-24194-c**

Amount of Each Receipt this Period  
**100**

Full Name (Last, First, Middle Initial)  
**B. Christopher Winn**

Mailing Address 17853 Santiago Boulevard Bldg. 107

City Villa Park    State CA    Zip Code 92861-4113

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

Name of Employer: Sales and Service    Occupation: President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 01 / 2014**

**Transaction ID : 1119-24175-c**

Amount of Each Receipt this Period  
**100**

Full Name (Last, First, Middle Initial)  
**C. Christopher Winn**

Mailing Address 17853 Santiago Boulevard Bldg. 107

City Villa Park    State CA    Zip Code 92861-4113

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

Name of Employer: Sales and Service    Occupation: President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : 1119-24178-c**

Amount of Each Receipt this Period  
**100**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **300.00**

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

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

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

FOR LINE NUMBER: PAGE 11 OF 18  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Gen Equity Federal PAC**

**A.** Full Name (Last, First, Middle Initial)  
**Christopher Winn**

Mailing Address 17853 Santiago Boulevard  
Bldg. 107

City Villa Park State CA Zip Code 92861-4113

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

Name of Employer Sales and Service Occupation President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 01 / 2014**

**Transaction ID : 1119-24193-c**

Amount of Each Receipt this Period  
**100**

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>2200.00</b>

**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)  
**Gen Equity Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Adam Laxalt for Attorney General LLC**

Mailing Address PO Box 97801

City Las Vegas State NV Zip Code 89193-7801

Purpose of Disbursement  
Other: Non Federal Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 13 / 2014

Transaction ID : SB21B-3327-24185-e

Amount of Each Disbursement this Period

2500

**B. Authorize.net**

Mailing Address PO Box 8999

City San Francisco State CA Zip Code 94128-8999

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2014

Transaction ID : SB21B-3223-24179-e

Amount of Each Disbursement this Period

25.33

**C. Authorize.net**

Mailing Address PO Box 8999

City San Francisco State CA Zip Code 94128-8999

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 04 / 2014

Transaction ID : SB21B-3223-24181-e

Amount of Each Disbursement this Period

25.33

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

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

2550.66

**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)  
**Gen Equity Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Authorize.net**

Mailing Address PO Box 8999

City San Francisco State CA Zip Code 94128-8999

Purpose of Disbursement  
Credit Card Processing Fees

**001**  
Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : SB21B-3223-24199-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. CompleteCampaigns.com**

Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement  
Administrative/Salary/Overhead: Software

**001**  
Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : SB21B-2064-24162-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. CompleteCampaigns.com**

Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement  
Administrative/Salary/Overhead: Software

**001**  
Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : SB21B-2064-24184-e**

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)  
**Gen Equity Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Ducey 2014**

Mailing Address 6740 W Deer Valley Road  
Suite D107 PMB 205

City Glendale State AZ Zip Code 85310-5952

Purpose of Disbursement  
Other: Non Federal Candidate Donation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-3326-24183-e**

Amount of Each Disbursement this Period

**B. Piryx, Inc.**

Mailing Address 401 W 15th Street  
Suite 520

City Austin State TX Zip Code 78701-1671

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-2558-24174-e**

Amount of Each Disbursement this Period

**C. Piryx, Inc.**

Mailing Address 401 W 15th Street  
Suite 520

City Austin State TX Zip Code 78701-1671

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-2558-24173-e**

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)  
**Gen Equity Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Piryx, Inc.**

Mailing Address 401 W 15th Street  
Suite 520

City Austin State TX Zip Code 78701-1671

Purpose of Disbursement  
Credit Card Discount Fees

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : SB21B-2558-24172-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Piryx, Inc.**

Mailing Address 401 W 15th Street  
Suite 520

City Austin State TX Zip Code 78701-1671

Purpose of Disbursement  
Credit Card Discount Fees

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : SB21B-2558-24171-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Piryx, Inc.**

Mailing Address 401 W 15th Street  
Suite 520

City Austin State TX Zip Code 78701-1671

Purpose of Disbursement  
Credit Card Processing Fees

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : SB21B-2558-24170-e

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)  
**Gen Equity Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Piryx, Inc.**

Mailing Address 401 W 15th Street  
Suite 520

City Austin State TX Zip Code 78701-1671

Purpose of Disbursement  
Credit Card Processing Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 14 / 2014

Transaction ID : SB21B-2558-24169-e

Amount of Each Disbursement this Period

9

Full Name (Last, First, Middle Initial)

**B. Piryx, Inc.**

Mailing Address 401 W 15th Street  
Suite 520

City Austin State TX Zip Code 78701-1671

Purpose of Disbursement  
Credit Card Processing

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 29 / 2014

Transaction ID : SB21B-2558-24197-e

Amount of Each Disbursement this Period

4.5

Full Name (Last, First, Middle Initial)

**C. Piryx, Inc.**

Mailing Address 401 W 15th Street  
Suite 520

City Austin State TX Zip Code 78701-1671

Purpose of Disbursement  
Credit Card Processing Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2014

Transaction ID : SB21B-2558-24203-e

Amount of Each Disbursement this Period

4.5

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

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

18.00



**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)  
**Gen Equity Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Piryx, Inc.**

Mailing Address 401 W 15th Street  
Suite 520

City Austin State TX Zip Code 78701-1671

Purpose of Disbursement  
Credit Card Processing Fees

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-2558-24202-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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 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 checked="" 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)  
**Gen Equity Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Royce Campaign Committee**

Mailing Address PO Box 2525

City Orange State CA Zip Code 92859-0525

Purpose of Disbursement  
Political Contribution: Contribution

011

Candidate Name

**Ed Royce**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 40

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
09 / 18 / 2014

**Transaction ID : SB23-2645-24186-e**

Amount of Each Disbursement this Period

2500

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

2500.00

2500.00