

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. 12FE4M5
Madison Action Fund

ADDRESS (number and street) PO Box 251
Check if different than previously reported. (ACC) Aledo TX 76008

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00524520

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 M M / D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 07 / 01 / 2014 through M M / D D / Y Y Y Y Y Y 07 / 31 / 2014

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 Paul Kilgore

Signature of Treasurer Paul Kilgore [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 08 / 14 / 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.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Madison Action Fund

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"/>		10615.10
(b) Cash on Hand at Beginning of Reporting Period.....	43873.53	
(c) Total Receipts (from Line 19)	2465.00	240204.91
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	46338.53	250820.01
7. Total Disbursements (from Line 31).....	22536.34	227017.82
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	23802.19	23802.19
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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

Madison Action Fund

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).....	1355.00	214217.00
(ii) Unitemized	1110.00	25987.91
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2465.00	240204.91
(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)	2465.00	240204.91
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))..... ▶	2465.00	240204.91
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2465.00	240204.91

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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	16236.34	82786.06
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	16236.34	82786.06
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)	6200.00	144131.76
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	100.00	100.00
(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)).....	100.00	100.00
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)) ..	22536.34	227017.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22536.34	227017.82

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)	2465.00	240204.91
34. Total Contribution Refunds (from Line 28(d))	100.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2365.00	240104.91
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	16236.34	82786.06
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	16236.34	82786.06

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 9
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Madison Action Fund

Full Name (Last, First, Middle Initial)
A. Nancy Cagle

Mailing Address 40 Waterford Dr

City State Zip Code
Nacogdoches TX 75965

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 25 / 2014

Transaction ID : SA11AI.5123

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Jim Leste

Mailing Address 3437 Via Loma Vista # 100

City State Zip Code
Escondido CA 92029

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

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

Transaction ID : SA11AI.5129

Amount of Each Receipt this Period
450.00

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

Mailing Address PO Box 1049

City State Zip Code
Crockett TX 75835

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
605.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 09 / 2014

Transaction ID : SA11AI.5138

Amount of Each Receipt this Period
405.00

SUBTOTAL of Receipts This Page (optional).....▶	1355.00
TOTAL This Period (last page this line number only).....▶	1355.00

**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)
Madison Action Fund

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address PO Box 25118

City Tampa State FL Zip Code 33622

Purpose of Disbursement
PAC Bank Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 08 / 2014

Transaction ID : SB21B.5150

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

B. Global Service Fee

Mailing Address 10705 Red Run Blvd

City Rockville State MD Zip Code 20855

Purpose of Disbursement
PAC Transaction Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2014

Transaction ID : SB21B.5111

Amount of Each Disbursement this Period

263.20

Full Name (Last, First, Middle Initial)

C. RST Marketing

Mailing Address 1272 Corporate Park Road

City Forest State VA Zip Code 24551

Purpose of Disbursement
PAC Direct Mail Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 17 / 2014

Transaction ID : SB21B.5107

Amount of Each Disbursement this Period

11132.30

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

11410.50

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)
Madison Action Fund

Full Name (Last, First, Middle Initial)

A. RST Marketing

Mailing Address 1272 Corporate Park Road

City Forest State VA Zip Code 24551

Purpose of Disbursement
PAC Direct Mail Printing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2014

Transaction ID : **SB21B.5110**

Amount of Each Disbursement this Period

4169.54

Category/Type

Full Name (Last, First, Middle Initial)

B. Kris Shafer

Mailing Address 2186 CR 423

City Stephenville State TX Zip Code 76401

Purpose of Disbursement
Gas & Food

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 07 / 2014

Transaction ID : **SB21B.5094**

Amount of Each Disbursement this Period

356.47

Category/Type

Full Name (Last, First, Middle Initial)

C. Sunrise Data Services

Mailing Address 20130 Lakeview Center Plaza
Ste 300

City Ashburn State VA Zip Code 20147

Purpose of Disbursement
PAC Data Work

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 17 / 2014

Transaction ID : **SB21B.5109**

Amount of Each Disbursement this Period

90.00

Category/Type

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

4616.01

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

16026.51

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Madison Action Fund	FEC IDENTIFICATION NUMBER ▼ C C00524520
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 M / D D D / Y Y Y Y Y Y	

Full Name of Payee Surge Data Technologies	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 07 / 22 / 2014
Mailing Address 1550 Old Annetta Rd	Amount M M M M M M . 0 0 5000.00
City State Zip Code Aledo TX 76008	Transaction ID : SE.5098 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 07 / 14 / 2014
Purpose of Expenditure Robo Calls	Category/Type M M M M M M 001
Name of Federal Candidate MILTON WOLF	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____ District: <u>00</u> State: <u>KS</u>
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) _____ M M M M M M . 0 0 5000.00

Full Name of Payee Surge Data Technologies	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 07 / 22 / 2014
Mailing Address 1550 Old Annetta Rd	Amount M M M M M M . 0 0 1200.00
City State Zip Code Aledo TX 76008	Transaction ID : SE.5099 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 07 / 14 / 2014
Purpose of Expenditure Robo Calls	Category/Type M M M M M M 001
Name of Federal Candidate MILTON WOLF	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____ District: <u>00</u> State: <u>KS</u>
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) _____ M M M M M M . 0 0 6200.00

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	M M M M M M . 0 0 6200.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	M M M M M M . 0 0 0.00
(c) TOTAL Independent Expenditures..... ▶	M M M M M M . 0 0 6200.00

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.

Paul Kilgore [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
08 / 14 / 2014

Signature