

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 YG ACTION FUND

ADDRESS (number and street) 211 NORTH UNION STREET SUITE 100 ALEXANDRIA VA 22314 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00504761 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, 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), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11) (Non-Election Year Only), Dec 20 (M12) (Non-Election Year Only), 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 11 / 25 / 2014 through 12 / 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 SCOTT RIALS

Signature of Treasurer SCOTT RIALS [Electronically Filed] Date 01 / 31 / 2015

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)

Page 2

Write or Type Committee Name

YG 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"/>	<input type="text" value="80632.54"/>	<input type="text" value="80632.54"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="40490.70"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="0.00"/>	<input type="text" value="144240.87"/>
(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="40490.70"/>	<input type="text" value="224873.41"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="29066.74"/>	<input type="text" value="213449.45"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="11423.96"/>	<input type="text" value="11423.96"/>
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

YG 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).....	0.00	144000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	144000.00
(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)	0.00	144000.00
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	240.87
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))..... ▶	0.00	144240.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	0.00	144240.87

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	29066.74	213449.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	29066.74	213449.45
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)	0.00	0.00
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	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)) ..	29066.74	213449.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29066.74	213449.45

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)	0.00	144000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	144000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	29066.74	213449.45
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	240.87
38. Net Operating Expenditures (subtract Line 37 from Line 36)	29066.74	213208.58

**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

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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)
A. ATCHLEY & ASSOCIATES

Date of Disbursement: / /

Mailing Address: 6850 AUSTIN CENTER BLVD.
Suite 180

City: AUSTIN State: TX Zip Code: 78731

Purpose of Disbursement: ACCOUNTING SERVICES

Candidate Name:

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID : **SB21B.6100**

Amount of Each Disbursement this Period:

Category/Type:

Full Name (Last, First, Middle Initial)
B. CHRISTOPHER J. BOND

Date of Disbursement: / /

Mailing Address: 211 NORTH UNION STREET
SUITE 100

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: PHONE EXPENSE REIMBURSEMENT

Candidate Name:

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID : **SB21B.6088**

Amount of Each Disbursement this Period:

Category/Type:

Full Name (Last, First, Middle Initial)
C. AT&T MOBILITY

Date of Disbursement: / /

Mailing Address: PO BOX 536216

City: ATLANTA State: GA Zip Code: 30353-6216

Purpose of Disbursement: PHONE EXPENSE

Candidate Name:

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID : **SB21B.6088.0**

Amount of Each Disbursement this Period:

Category/Type:

[MEMO ITEM]

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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)
A. CHRISTOPHER J. BOND

Date of Disbursement: / /

Mailing Address: 211 NORTH UNION STREET
SUITE 100

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: PAYROLL

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID : **SB21B.6092**

Amount of Each Disbursement this Period:

Full Name (Last, First, Middle Initial)
B. CHRISTOPHER J. BOND

Date of Disbursement: / /

Mailing Address: 211 NORTH UNION STREET
SUITE 100

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: PHONE EXPENSE REIMBURSEMENT

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID : **SB21B.6109**

Amount of Each Disbursement this Period:

Full Name (Last, First, Middle Initial)
C. AT&T MOBILITY

Date of Disbursement: / /

Mailing Address: PO BOX 536216

City: ATLANTA State: GA Zip Code: 30353-6216

Purpose of Disbursement: PHONE EXPENSE

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID : **SB21B.6109.0**

Amount of Each Disbursement this Period:

[MEMO ITEM]

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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)

A. CHRISTOPHER J. BOND

Mailing Address 211 NORTH UNION STREET
SUITE 100

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B.6113

Amount of Each Disbursement this Period

684.77

Full Name (Last, First, Middle Initial)

B. CAPITOL IDEA TECHNOLOGY, INC.

Mailing Address 14819 POTOMAC BRANCH DRIVE

City WOODBRIDGE State VA Zip Code 22191

Purpose of Disbursement
COMPUTER SUPPORT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 23 / 2014

Transaction ID : SB21B.6102

Amount of Each Disbursement this Period

431.50

Full Name (Last, First, Middle Initial)

C. CFC CONSULTING

Mailing Address 3724 DUNBARTON DRIVE

City MOUNTAIN BROOK State AL Zip Code 35223

Purpose of Disbursement
ACCOUNTING SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2014

Transaction ID : SB21B.6095

Amount of Each Disbursement this Period

2000.00

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

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

3116.27

**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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)

A. CFC CONSULTING

Mailing Address 3724 DUNBARTON DRIVE

City MOUNTAIN BROOK State AL Zip Code 35223

Purpose of Disbursement ACCOUNTING SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2014

Transaction ID : **SB21B.6108**

Amount of Each Disbursement this Period: 2000.00

Category/Type

Full Name (Last, First, Middle Initial)

B. GRAND SLAM FINANCE

Mailing Address 5930 REPUBLIC OF TEXAS BLVD

City AUSTIN State TX Zip Code 78735

Purpose of Disbursement ACCOUNTING SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 01 / 2014

Transaction ID : **SB21B.6094**

Amount of Each Disbursement this Period: 2800.00

Category/Type

Full Name (Last, First, Middle Initial)

C. GRAND SLAM FINANCE

Mailing Address 5930 REPUBLIC OF TEXAS BLVD

City AUSTIN State TX Zip Code 78735

Purpose of Disbursement ACCOUNTING SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2014

Transaction ID : **SB21B.6106**

Amount of Each Disbursement this Period: 2800.00

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7600.00

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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)

A. IPAYMENT, INC.

Mailing Address PO BOX 3429

City THOUSAND OAKS State CA Zip Code 91359

Purpose of Disbursement CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 03 / 2014

Transaction ID : **SB21B.6116**

Amount of Each Disbursement this Period: 17.95

Category/Type

Full Name (Last, First, Middle Initial)

B. IRS

Mailing Address PO BOX 105083

City ATLANTA State GA Zip Code 30348

Purpose of Disbursement PAYROLL TAXES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 03 / 2014

Transaction ID : **SB21B.6096**

Amount of Each Disbursement this Period: 310.42

Category/Type

Full Name (Last, First, Middle Initial)

C. IRS

Mailing Address PO BOX 105083

City ATLANTA State GA Zip Code 30348

Purpose of Disbursement PAYROLL TAXES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2014

Transaction ID : **SB21B.6105**

Amount of Each Disbursement this Period: 262.08

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 590.45

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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)
A. STACEY JOHNSON

Date of Disbursement: MM / DD / YYYY
11 / 30 / 2014

Mailing Address: 211 NORTH UNION STREET
SUITE 100

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: PHONE EXPENSE REIMBURSEMENT

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B.6090**

Amount of Each Disbursement this Period: 60.00

Category/Type: _____

Full Name (Last, First, Middle Initial)
B. VERIZON WIRELESS

Date of Disbursement: MM / DD / YYYY
11 / 30 / 2014

Mailing Address: 6198 LITTLE RIVER TPKE

City: ALEXANDRIA State: VA Zip Code: 22312

Purpose of Disbursement: PHONE EXPENSE

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B.6090.0**

Amount of Each Disbursement this Period: 60.00

Category/Type: _____

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. STACEY JOHNSON

Date of Disbursement: MM / DD / YYYY
11 / 30 / 2014

Mailing Address: 211 NORTH UNION STREET
SUITE 100

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: PAYROLL

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B.6093**

Amount of Each Disbursement this Period: 824.72

Category/Type: _____

SUBTOTAL of Disbursements This Page (optional)..... ▶ 884.72

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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)

A. STACEY JOHNSON

Mailing Address 211 NORTH UNION STREET
SUITE 100

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PHONE EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2014

Transaction ID : **SB21B.6099**

Amount of Each Disbursement this Period

4.98

Full Name (Last, First, Middle Initial)

B. STACEY JOHNSON

Mailing Address 211 NORTH UNION STREET
SUITE 100

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PHONE EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : **SB21B.6111**

Amount of Each Disbursement this Period

60.00

Full Name (Last, First, Middle Initial)

C. VERIZON WIRELESS

Mailing Address 6198 LITTLE RIVER TPKE

City ALEXANDRIA State VA Zip Code 22312

Purpose of Disbursement
PHONE EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : **SB21B.6111.0**

Amount of Each Disbursement this Period

60.00

[MEMO ITEM]

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

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

64.98

**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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)

A. STACEY JOHNSON

Mailing Address 211 NORTH UNION STREET
SUITE 100

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : **SB21B.6114**

Amount of Each Disbursement this Period

824.72

Full Name (Last, First, Middle Initial)

B. RED RIVER LLC

Mailing Address 3140 W. WARD ROAD
SUITE 201

City DUNKIRK State MD Zip Code 20754

Purpose of Disbursement
FUNDRAISING/EVENT PLANNING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014

Transaction ID : **SB21B.6084**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. RED RIVER LLC

Mailing Address 3140 W. WARD ROAD
SUITE 201

City DUNKIRK State MD Zip Code 20754

Purpose of Disbursement
FUNDRAISING/EVENT PLANNING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : **SB21B.6107**

Amount of Each Disbursement this Period

2500.00

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

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

5824.72

**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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)

A. REGUS MANAGEMENT GROUP, LLC

Mailing Address 211 N. UNION ST, SUITE 100

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
OFFICE RENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	5		2	0	1	4

Transaction ID : **SB21B.6087**

Amount of Each Disbursement this Period

1	4	9	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. REGUS MANAGEMENT GROUP, LLC

Mailing Address 211 N. UNION ST, SUITE 100

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
OFFICE RENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	3		2	0	1	4

Transaction ID : **SB21B.6103**

Amount of Each Disbursement this Period

1	4	9	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. RIGHT PATH STRATEGIC AFFAIRS, LLC

Mailing Address 3960 ROLLING HILLS DRIVE

City CUMMING State GA Zip Code 30041

Purpose of Disbursement
MANAGEMENT CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	5		2	0	1	4

Transaction ID : **SB21B.6085**

Amount of Each Disbursement this Period

2	0	0	.	0	0
---	---	---	---	---	---

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

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

2	2	9	8	.	0	0
---	---	---	---	---	---	---

2	2	9	8	.	0	0
---	---	---	---	---	---	---

**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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)

A. RIGHT PATH STRATEGIC AFFAIRS, LLC

Mailing Address 3960 ROLLING HILLS DRIVE

City CUMMING State GA Zip Code 30041

Purpose of Disbursement
MANAGEMENT CONSULTING

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 14 / 2014

Transaction ID : SB21B.6101

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. SLATERS LANE J.V.

Mailing Address 815 SLATERS LANE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
OFFICE RENT

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2014

Transaction ID : SB21B.6098

Amount of Each Disbursement this Period

2060.00

Full Name (Last, First, Middle Initial)

C. WELLS FARGO

Mailing Address 111 CONGRESS AVE
11TH FLOOR

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : SB21B.6115

Amount of Each Disbursement this Period

30.76

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

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

4090.76

**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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)

A. WILEY REIN LLP

Mailing Address 1776 K STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 25 / 2014

Transaction ID : SB21B.6086

Amount of Each Disbursement this Period: 328.00

Category/Type

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 328.00

TOTAL This Period (last page this line number only)..... ▶ 29015.67