# 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

Women Speak Out PAC

ADDRESS (number and street) ▼

1200 New Hampshire Ave NW

Suite 750

☐ Check if different than previously reported. (ACC)

Washington | DC | 20036 –

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00530766

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)
- ☐ 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 MM / DD / YYYY in the State of

(d) 30-Day **POST**-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period 08 / 01 / 2014 through 08 / 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 Ms. Emily Buchanan

Signature of Treasurer *Ms. Emily Buchanan* ***[Electronically Filed]*** Date 05 / 14 / 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.

| Office Use Only | | | | | | | |
|---|---|---|---|---|---|---|---|

# SUMMARY PAGE
## OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Rev. 02/2003)



Write or Type Committee Name

Women Speak Out PAC

Report Covering the Period: From: 08 / 01 / 2014 To: 08 / 31 / 2014

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|---|---|
| 6. (a) Cash on Hand January 1, 2014 | | 1842.48 |
| (b) Cash on Hand at Beginning of Reporting Period | 207684.58 | |
| (c) Total Receipts (from Line 19) | 702612.77 | 1718670.33 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 910297.35 | 1720512.81 |
| 7. Total Disbursements (from Line 31) | 322724.64 | 1132940.1 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 587572.71 | 587572.71 |
| 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

Women Speak Out PAC

Report Covering the Period: From: 08 / 01 / 2014 To: 08 / 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) | 700522.77 | 1699652.49 |
| (ii) Unitemized | 2090.00 | 19017.84 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶ | 702612.77 | 1718670.33 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (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) ▶ | 702612.77 | 1718670.33 |
| 12. Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 |
| 13. All Loans Received | 0 | 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 | 0 |
| 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 | |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ▶ | 702612.77 | 1718670.33 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶ | 702612.77 | 1718670.33 |

# DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)



| 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 | 178749.48 | 648273.32 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶ | 178749.48 | 648273.32 |
| 22. Transfers to Affiliated/Other Party Committees | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | 0 | 0 |
| 24. Independent Expenditures (use Schedule E) | 143975.16 | 484666.78 |
| 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 | 0 |
| 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 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 322724.64 | 1132940.1 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶ | 322724.64 | 1132940.1 |

# DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)



| 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) | 702612.77 | 1718670.33 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0 | 0 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 702612.77 | 1718670.33 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶ | 178749.48 | 648273.32 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0 | 0 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶ | 178749.48 | 648273.32 |

# 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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial)
Richard Korpan

Mailing Address 31483 Morning Star Dr

City: Evergreen
State: CO
Zip Code: 80439

FEC ID number of contributing federal political committee.: C

Name of Employer: Retired
Occupation: Retired

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 08 / 01 / 2014

**Transaction ID : 3D-80B2-7AEF9470F1AF**

Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)
Ken Rasch

Mailing Address 1834 Johnson Ave

City: Fort Dodge
State: IA
Zip Code: 50501

FEC ID number of contributing federal political committee.: C

Name of Employer: Rasch Farms
Occupation: Quality Management Consultant

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt: 08 / 06 / 2014

**Transaction ID : 0A-BA7A-3EFFAB6609F8**

Amount of Each Receipt this Period: 50.00

**C.** Full Name (Last, First, Middle Initial)
Albert Wavering

Mailing Address 8487 Link Hills Loop

City: Gainesville
State: VA
Zip Code: 20155

FEC ID number of contributing federal political committee.: C

Name of Employer: Retired
Occupation: Retired

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 18 / 2014

**Transaction ID : 5D-AA2F-0602C790CC9F**

Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ▶ 2050.00

**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: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.**
Full Name (Last, First, Middle Initial): Laurel Hall
Mailing Address: 4839 Hoyer Dr
City: Sarasota State: FL Zip Code: 34241
FEC ID number of contributing federal political committee: C
Name of Employer: Homemaker
Occupation: Homemaker
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 300.00
Date of Receipt: 08 / 28 / 2014
**Transaction ID : E7-99C0-6CD2AF6BD8A3**
Amount of Each Receipt this Period: 100.00

**B.**
Full Name (Last, First, Middle Initial): C. McVaney
Mailing Address: 1520 West Canal Court Sure 220
City: Littleton State: CO Zip Code: 80120
FEC ID number of contributing federal political committee: C
Name of Employer: Retired
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 25000.00
Date of Receipt: 08 / 12 / 2014
**Transaction ID : 06-8396-29AAFD94C023**
Amount of Each Receipt this Period: 25000.00

**C.**
Full Name (Last, First, Middle Initial): Susan B Anthony List, Inc.
Mailing Address: 1707 L St., NW Suite 550
City: Washington State: DC Zip Code: 20036
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1575192.41
Date of Receipt: 08 / 01 / 2014
**Transaction ID : 9D-B12F-523F88DDEFF6**
Amount of Each Receipt this Period: 150000.00

**SUBTOTAL** of Receipts This Page (optional) ▶ 175100.00

**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: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial)
Robert Mercer

Mailing Address 600 Soute 25A

City: East Setauket
State: NY
Zip Code: 11733

FEC ID number of contributing federal political committee. C

Name of Employer: Renaissance Technolgies
Occupation: CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500000.00

Date of Receipt: M M 08 / D D 28 / Y Y Y Y 2014

**Transaction ID : 09-BC5F-00D93B9DD132**

Amount of Each Receipt this Period: 500000.00

**B.** Full Name (Last, First, Middle Initial)
Susan B Anthony List, Inc.

Mailing Address 1707 L St., NW
Suite 550

City: Washington
State: DC
Zip Code: 20036

FEC ID number of contributing federal political committee. C

Name of Employer:
Occupation:

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1575192.41

Date of Receipt: M M 08 / D D 31 / Y Y Y Y 2014

**Transaction ID : 22-84AA-90483C64D8A5**

Amount of Each Receipt this Period: 5000.00

In-Kind Contribution of Meida Consulting

In-Kind Contribution of Meida Consulting

**C.** Full Name (Last, First, Middle Initial)
Susan B Anthony List, Inc.

Mailing Address 1707 L St., NW
Suite 550

City: Washington
State: DC
Zip Code: 20036

FEC ID number of contributing federal political committee. C

Name of Employer:
Occupation:

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1575192.41

Date of Receipt: M M 08 / D D 31 / Y Y Y Y 2014

**Transaction ID : 56-8A94-CCDF9A1D62CF**

Amount of Each Receipt this Period: 14852.00

In-Kind Donaitons of Salaries

In-Kind Donaitons of Salaries

**SUBTOTAL** of Receipts This Page (optional) ▶ 519852.00

**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: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.**
Full Name (Last, First, Middle Initial): Susan B Anthony List, Inc.
Mailing Address: 1707 L St., NW, Suite 550
City: Washington State: DC Zip Code: 20036
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1575192.41
Date of Receipt: 08 / 31 / 2014
**Transaction ID : E7-A0C5-24D4512A8C5D**
Amount of Each Receipt this Period: 1136.18
In-Kind Donations of Payroll Tax Expense

In-Kind Donations of Payroll Tax Expense

**B.**
Full Name (Last, First, Middle Initial): Susan B Anthony List, Inc.
Mailing Address: 1707 L St., NW, Suite 550
City: Washington State: DC Zip Code: 20036
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1575192.41
Date of Receipt: 08 / 31 / 2014
**Transaction ID : A2-84BA-C3D216E0273C**
Amount of Each Receipt this Period: 2384.59
In-Kind Donaiton of Office Expense

In-Kind Donaiton of Office Expense

**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
Amount of Each Receipt this Period:

**SUBTOTAL** of Receipts This Page (optional) ▶ 3520.77

**TOTAL** This Period (last page this line number only) ▶ 700522.77

# 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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Dick Wadhams
Mailing Address: 6388 South Chase Court
City: Littleton State: CO Zip Code: 80123
Purpose of Disbursement: Consulting
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 19 / 2014
Transaction ID : 014F4998-3CB9-4ED1-9
Amount of Each Disbursement this Period: 5000.00

**B.** Full Name (Last, First, Middle Initial): Time Warner Cable
Mailing Address: PO 70872
City: Charlotte State: NC Zip Code: 28272
Purpose of Disbursement: 6516 Falls of Neuse Rd
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 05 / 2014
Transaction ID : 031E6CB9-A697-4453-9
Amount of Each Disbursement this Period: 168.71

**C.** Full Name (Last, First, Middle Initial): Christopher Crawford
Mailing Address: 18 Fairhaven road
City: Nashua State: NH Zip Code: 03060
Purpose of Disbursement: Salary
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 08 / 2014
Transaction ID : 07B775C0-BED3-4D75-9
Amount of Each Disbursement this Period: 1100.75

**SUBTOTAL** of Disbursements This Page (optional) ▶ 6269.46

**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

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[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Fred O Russell
Mailing Address: 5425 Lavey lane
City: Baker State: LA Zip Code: 70714
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2014
Transaction ID : 0845333C-F168-4D87-9
Amount of Each Disbursement this Period: 1270.42

**B.** Full Name (Last, First, Middle Initial): Tami Fitzgerald
Mailing Address: 109 Carpathian Way
City: Raleigh State: NC Zip Code: 27615
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 26 / 2014
Transaction ID : 0FC6CEE2-C2B6-421B-A
Amount of Each Disbursement this Period: 386.80

**C.** Full Name (Last, First, Middle Initial): Mr. Kevin Shinault
Mailing Address: 175 Hillcrest Ct.
City: Pilot Mountian State: NC Zip Code: 27041
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 08 / 2014
Transaction ID : 15AE7D6F-65C2-4DA7-8
Amount of Each Disbursement this Period: 323.08

**SUBTOTAL** of Disbursements This Page (optional) ▶ 1980.30

**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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial)
Susan B Anthony List

Mailing Address 1707 L St., NW

City: Washington State: DC Zip Code: 20036

Purpose of Disbursement: Reimbursement for Travel

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 31 / 2014

**Transaction ID : 16B2430B-299B-4E41-B**

Amount of Each Disbursement this Period: 4401.81

**B.** Full Name (Last, First, Middle Initial)
JSZ Property Management

Mailing Address 1507 East Race

City: Searcy State: AR Zip Code: 72143

Purpose of Disbursement: Rent

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 26 / 2014

**Transaction ID : 17B7387E-8606-43EA-8**

Amount of Each Disbursement this Period: 550.00

**C.** Full Name (Last, First, Middle Initial)
Duke Energy

Mailing Address PO Box 70516

City: Charlotte State: NC Zip Code: 28272

Purpose of Disbursement: Utilities

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 05 / 2014

**Transaction ID : 1AAB160D-8500-4F54-B**

Amount of Each Disbursement this Period: 414.80

**SUBTOTAL** of Disbursements This Page (optional) ▶ 5366.61

**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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Marjorie Dannenfelser
Mailing Address: 1707 L St, NW, Suite 350
City: Washington State: DC Zip Code: 20036
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2014
Transaction ID : 1ABA95ED-23DA-4EA4-9
Amount of Each Disbursement this Period: 1174.52

**B.** Full Name (Last, First, Middle Initial): Entergy Arkansas, Inc.
Mailing Address: PO Box 8101
City: Baton Rouge State: LA Zip Code: 70891
Purpose of Disbursement: Utilities
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 19 / 2014
Transaction ID : 1BFEBBED-DFDF-46F5-A
Amount of Each Disbursement this Period: 42.35

**C.** Full Name (Last, First, Middle Initial): Susan B Anthony List
Mailing Address: 1707 L St., NW
City: Washington State: DC Zip Code: 20036
Purpose of Disbursement: Reimbursement for Office Supplies
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 31 / 2014
Transaction ID : 1CA9DEAC-91BE-4F61-B
Amount of Each Disbursement this Period: 128.64

**SUBTOTAL** of Disbursements This Page (optional) ▶ 1345.51

**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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Michelle Rickert
Mailing Address: 710 St. Martins Lane
City: Bossier City State: LA Zip Code: 71111
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 08 / D D 29 / Y Y Y Y 2014
Transaction ID : 1FB5F3FC-E02C-4EBA-8
Amount of Each Disbursement this Period: 2506.50

**B.** Full Name (Last, First, Middle Initial): Joanne Filiatreau
Mailing Address: 3 Putter Cove
City: Sherwood State: AR Zip Code: 72120
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 08 / D D 19 / Y Y Y Y 2014
Transaction ID : 25F82ED5-5925-46EB-B
Amount of Each Disbursement this Period: 907.66

**C.** Full Name (Last, First, Middle Initial): PayChex
Mailing Address: 911 Panorama Trail S
City: Rochester State: NY Zip Code: 14625
Purpose of Disbursement: Credit Card Processing
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 08 / D D 15 / Y Y Y Y 2014
Transaction ID : 26398222-2A86-4A5B-9
Amount of Each Disbursement this Period: 233.86

**SUBTOTAL** of Disbursements This Page (optional) ▶ 3648.02

**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

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Discount Bankcard
Mailing Address: 21215 Burbank Blvd, Suite 300
City: Woodland Hills State: CA Zip Code: 91367
Purpose of Disbursement: Credit Card Processing
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 01 / 2014
Transaction ID : 27AD76B1-2858-4B73-A
Amount of Each Disbursement this Period: 0.38

**B.** Full Name (Last, First, Middle Initial): Tami Fitzgerald
Mailing Address: 109 Carpathian Way
City: Raleigh State: NC Zip Code: 27615
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2014
Transaction ID : 2AD862B7-1A70-4DE5-9
Amount of Each Disbursement this Period: 4621.00

**C.** Full Name (Last, First, Middle Initial): Cleco Power, LLC
Mailing Address: PO Box
City: Dallas State: TX Zip Code: 75266
Purpose of Disbursement: Utilities
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 26 / 2014
Transaction ID : 2D5C298C-41A1-4A37-9
Amount of Each Disbursement this Period: 40.29

**SUBTOTAL** of Disbursements This Page (optional) ▶ 4661.67

**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

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Ms. Ruth Wisher
Mailing Address: 515 Gardere Lane, Apt 215
City: Baton Rouge State: LA Zip Code: 70820
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 08 / D D 12 / Y Y Y Y 2014
Transaction ID : 2D8956CB-6685-472C-8
Amount of Each Disbursement this Period: 532.41

**B.** Full Name (Last, First, Middle Initial): MTOT Disc Bankcard
Mailing Address: 21215 Burbank Blvd, Suite 300
City: Woodland Hills State: CA Zip Code: 91367
Purpose of Disbursement: Credit Card Processing
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 08 / D D 04 / Y Y Y Y 2014
Transaction ID : 2E737256-B2EA-4DEF-A
Amount of Each Disbursement this Period: 97.87

**C.** Full Name (Last, First, Middle Initial): Ms. Alexandra Doucet
Mailing Address: 73 Catalpa Trace
City: Covington State: LA Zip Code: 70433
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 08 / D D 19 / Y Y Y Y 2014
Transaction ID : 2F01661E-0391-4BE4-9
Amount of Each Disbursement this Period: 148.22

**SUBTOTAL** of Disbursements This Page (optional) ▶ 778.50

**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

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Tami Fitzgerald
Mailing Address: 109 Carpathian Way
City: Raleigh State: NC Zip Code: 27615
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 19 / 2014
Transaction ID : 2FB525B7-8275-4D90-B
Amount of Each Disbursement this Period: 382.17

**B.** Full Name (Last, First, Middle Initial): DC Unemployment Services
Mailing Address: 501 C St. NW #501
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: Payroll Tax Expense
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 08 / 2014
Transaction ID : 311807B5-AEA3-47CA-B
Amount of Each Disbursement this Period: 661.97

**C.** Full Name (Last, First, Middle Initial): Francis Richardson
Mailing Address: 220 Doucet Rd
City: Lafayette State: LA Zip Code: 70503
Purpose of Disbursement: Wire Fee
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 05 / 2014
Transaction ID : 31CC5132-AC27-4D0F-9
Amount of Each Disbursement this Period: 20.00

**SUBTOTAL** of Disbursements This Page (optional) ▶ 1064.14

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

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

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Garland Honeycutt
Mailing Address: 1081 Fork Mountain
City: Bakersville State: NC Zip Code: 28705
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 05 / 2014
Transaction ID : 38C8D879-EED8-44B1-8
Amount of Each Disbursement this Period: 316.50

**B.** Full Name (Last, First, Middle Initial): Julie Harris
Mailing Address: 3654 Tara Street
City: Springdale State: AR Zip Code: 72762
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 26 / 2014
Transaction ID : 3A4093B4-6E30-414D-A
Amount of Each Disbursement this Period: 91.93

**C.** Full Name (Last, First, Middle Initial): LA Department of Taxation
Mailing Address: PO Box 201
City: Baton Rouge State: LA Zip Code: 70802
Purpose of Disbursement: Payroll Taxes
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2014
Transaction ID : 3A621F20-8640-4B15-B
Amount of Each Disbursement this Period: 296.00

**SUBTOTAL** of Disbursements This Page (optional) ▶ 704.43

**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

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial)
DC Unemployment Services

Mailing Address 501 C St. NW #501

City: Washington
State: DC
Zip Code: 20001

Purpose of Disbursement: Payroll Tax Expense

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 08 / 2014

Transaction ID : 3B68B543-710C-4906-8

Amount of Each Disbursement this Period: 43.50

**B.** Full Name (Last, First, Middle Initial)
Trace Strategies, LLC

Mailing Address 11104 Westpoint Court

City: Little Rock
State: AR
Zip Code: 72211

Purpose of Disbursement: August Retainer/Expenses

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 05 / 2014

Transaction ID : 4131A0EA-8BCD-4A61-8

Amount of Each Disbursement this Period: 6212.23

**C.** Full Name (Last, First, Middle Initial)
Mr. Grayson Greco

Mailing Address 115 Wyndham Way

City: Wilmington
State: NC
Zip Code: 24811

Purpose of Disbursement: Travel Reimbursement

Candidate Name:

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 19 / 2014

Transaction ID : 447D1CA3-2EE0-4AA1-B

Amount of Each Disbursement this Period: 110.76

**SUBTOTAL** of Disbursements This Page (optional) ▶ 6366.49

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

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

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Taylor Wilson
Mailing Address: 6300 terra verde dr
City: Raleigh State: NC Zip Code: 27609
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 12 / 2014
Transaction ID : 45EB9743-B3E5-4FEA-8
Amount of Each Disbursement this Period: 289.84

**B.** Full Name (Last, First, Middle Initial): Taylor Wilson
Mailing Address: 6300 terra verde dr
City: Raleigh State: NC Zip Code: 27609
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 19 / 2014
Transaction ID : 46333AEC-5796-47EC-A
Amount of Each Disbursement this Period: 226.31

**C.** Full Name (Last, First, Middle Initial): Ms. Marie Guillot
Mailing Address: 207 N Demanade Blvd
City: Lafayette State: LA Zip Code: 70503
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 19 / 2014
Transaction ID : 46711AFB-9687-4A5E-A
Amount of Each Disbursement this Period: 204.29

**SUBTOTAL** of Disbursements This Page (optional) ▶ 720.44

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

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

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Mr. Mick Bransfield
Mailing Address: 12720 Builders Rd
City: Herndon State: VA Zip Code: 20170
Purpose of Disbursement: Consulting
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 19 / 2014
Transaction ID : 47BC78D0-E5CB-4BEC-B
Amount of Each Disbursement this Period: 4431.10

**B.** Full Name (Last, First, Middle Initial): Charles B Schmitz
Mailing Address: 213 South Haynes St
City: Poplarville State: MS Zip Code: 39470
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2014
Transaction ID : 47C9C73B-D0CD-49C3-9
Amount of Each Disbursement this Period: 1847.00

**C.** Full Name (Last, First, Middle Initial): Ursula Anderson
Mailing Address: 210 Cooper Drive
City: Lafayette State: LA Zip Code: 70501
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2014
Transaction ID : 49AFDC68-B60A-4B6A-A
Amount of Each Disbursement this Period: 1385.25

**SUBTOTAL** of Disbursements This Page (optional) ▶ 7663.35

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

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

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Charles B Schmitz
Mailing Address: 213 South Haynes St
City: Poplarville State: MS Zip Code: 39470
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 26 / 2014
Transaction ID : 4A2F93B8-2F87-4641-B
Amount of Each Disbursement this Period: 65.00

**B.** Full Name (Last, First, Middle Initial): Mr. Robert Clapper
Mailing Address: 924 French St.
City: New Orleans State: LA Zip Code: 70124
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2014
Transaction ID : 4AAF948C-8A01-4C45-9
Amount of Each Disbursement this Period: 2270.75

**C.** Full Name (Last, First, Middle Initial): Discount Bankcard
Mailing Address: 21215 Burbank Blvd Suite 300
City: Woodland Hills State: CA Zip Code: 91367
Purpose of Disbursement: Credit Card Processing
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 04 / 2014
Transaction ID : 4ABD1F8E-F2F3-4EFC-9
Amount of Each Disbursement this Period: 0.95

**SUBTOTAL** of Disbursements This Page (optional) ▶ 2336.70

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

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

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial)
Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City: McLean State: VA Zip Code: 22101

Purpose of Disbursement: Bank Fees

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 01 / 2014

Transaction ID : 4B0034E7-DB6B-4C44-8

Amount of Each Disbursement this Period: 15.00

**B.** Full Name (Last, First, Middle Initial)
NC Department of Revenue

Mailing Address PO Box 25000

City: Raleigh State: NC Zip Code: 27640

Purpose of Disbursement: Payroll Taxes

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 29 / 2014

Transaction ID : 4FA2B96A-ED20-475C-8

Amount of Each Disbursement this Period: 855.00

**C.** Full Name (Last, First, Middle Initial)
C&K Properties

Mailing Address 6350 Cephis Drive

City: Clemmons State: NC Zip Code: 27012

Purpose of Disbursement: Rent

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 26 / 2014

Transaction ID : 504995D0-556E-4029-A

Amount of Each Disbursement this Period: 995.00

**SUBTOTAL** of Disbursements This Page (optional) ▶ 1865.00

**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

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Herbert Taylor
Mailing Address: 4809 Red Heart Drive
City: Wilmington State: NC Zip Code: 28412
Purpose of Disbursement: Rent
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 05 / 2014
Transaction ID : 53AD1604-9979-46CE-9
Amount of Each Disbursement this Period: 875.00

**B.** Full Name (Last, First, Middle Initial): Ms. Alexandra Doucet
Mailing Address: 73 Catalpa Trace
City: Covington State: LA Zip Code: 70433
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2014
Transaction ID : 5405D6DB-D938-4530-A
Amount of Each Disbursement this Period: 892.79

**C.** Full Name (Last, First, Middle Initial): Chain Bridge Bank
Mailing Address: 1445-A Laughlin Avenue
City: McLean State: VA Zip Code: 22101
Purpose of Disbursement: Bank Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 01 / 2014
Transaction ID : 54BD1D32-CAAB-4F77-A
Amount of Each Disbursement this Period: 15.00

**SUBTOTAL** of Disbursements This Page (optional) ▶ 1782.79

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

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

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[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial)
Taylor Wilson

Mailing Address 6300 terra verde dr

City: Raleigh State: NC Zip Code: 27609

Purpose of Disbursement: Salary

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 29 / 2014

Transaction ID : 55BDCF4F-517D-415F-A

Amount of Each Disbursement this Period: 2359.19

**B.** Full Name (Last, First, Middle Initial)
DC Unemployment Services

Mailing Address 501 C St. NW #501

City: Washington State: DC Zip Code: 20001

Purpose of Disbursement: Payroll Tax Expense

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 29 / 2014

Transaction ID : 5CA678EF-98B5-4FE4-B

Amount of Each Disbursement this Period: 633.52

**C.** Full Name (Last, First, Middle Initial)
Ms. Ruth Wisher

Mailing Address 515 Gardere Lane
Apt 215

City: Baton Rouge State: LA Zip Code: 70820

Purpose of Disbursement: Salary

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 29 / 2014

Transaction ID : 5FC926A0-3500-4C99-A

Amount of Each Disbursement this Period: 2963.19

**SUBTOTAL** of Disbursements This Page (optional) ▶ 5955.90

**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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): PayChex
Mailing Address: 911 Panorama Trail S
City: Rochester State: NY Zip Code: 14625
Purpose of Disbursement: Credit Card Processing
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 01 / 2014
Transaction ID : 623B5257-8057-416C-B
Amount of Each Disbursement this Period: 218.53

**B.** Full Name (Last, First, Middle Initial): PayChex
Mailing Address: 911 Panorama Trail S
City: Rochester State: NY Zip Code: 14625
Purpose of Disbursement: Credit Card Processing
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2014
Transaction ID : 627ABEAD-82E8-4A9C-8
Amount of Each Disbursement this Period: 200.95

**C.** Full Name (Last, First, Middle Initial): Mary Katherine Collins
Mailing Address: 15 1/2 Magnoila Circle
City: Searcy State: AR Zip Code: 72143
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2014
Transaction ID : 634BC527-8A1E-4ACD-8
Amount of Each Disbursement this Period: 2386.44

**SUBTOTAL** of Disbursements This Page (optional) ▶ 2805.92

**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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Taylor Wilson
Mailing Address: 6300 terra verde dr
City: Raleigh State: NC Zip Code: 27609
Purpose of Disbursement: Reimbursement
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 05 / 2014
Transaction ID : 64245435-3420-40EF-A
Amount of Each Disbursement this Period: 115.07

**B.** Full Name (Last, First, Middle Initial): Garland Honeycutt
Mailing Address: 1081 Fork Mountain
City: Bakersville State: NC Zip Code: 28705
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2014
Transaction ID : 64FB8522-4266-4510-B
Amount of Each Disbursement this Period: 2248.44

**C.** Full Name (Last, First, Middle Initial): Mr. Grayson Greco
Mailing Address: 115 Wyndham Way
City: Wilmington State: NC Zip Code: 24811
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 26 / 2014
Transaction ID : 68505F4A-A14D-4C40-8
Amount of Each Disbursement this Period: 264.52

**SUBTOTAL** of Disbursements This Page (optional) ▶ 2628.03

**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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Activist Manager
Mailing Address: PO Box 601
City: Great Falls State: VA Zip Code: 22066
Purpose of Disbursement: Consulting
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 26 / 2014
Transaction ID : 6882A5E1-2F1A-472D-9
Amount of Each Disbursement this Period: 3087.00

**B.** Full Name (Last, First, Middle Initial): Colonial Properties
Mailing Address: 5100 South Thompson St.
City: Springfield State: AR Zip Code: 72764
Purpose of Disbursement: Rent
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 26 / 2014
Transaction ID : 6A26D882-D16F-4B5A-9
Amount of Each Disbursement this Period: 695.00

**C.** Full Name (Last, First, Middle Initial): Mr. Mick Bransfield
Mailing Address: 12720 Builders Rd
City: Herndon State: VA Zip Code: 20170
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 26 / 2014
Transaction ID : 6B9851D1-21F9-490E-A
Amount of Each Disbursement this Period: 1196.75

**SUBTOTAL** of Disbursements This Page (optional) ▶ 4978.75

**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)
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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial)
Mr. Francisco Gonzales

Mailing Address 3461 HWY 39

City: Braithwaite State: LA Zip Code: 70040

Purpose of Disbursement: Salary

Category/Type: 001

Candidate Name:

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 29 / 2014

**Transaction ID : 6BD41351-03C2-414B-A**

Amount of Each Disbursement this Period: 361.09

**B.** Full Name (Last, First, Middle Initial)
Susan B Anthony List

Mailing Address 1707 L St., NW

City: Washington State: DC Zip Code: 20036

Purpose of Disbursement: In-Kind Donation of Payroll Tax Expense

Category/Type: 001

Candidate Name:

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 31 / 2014

**Transaction ID : 6DBD0EAD-4192-4897-9**

Amount of Each Disbursement this Period: 1136.18

**C.** Full Name (Last, First, Middle Initial)
Bamberger, Foreman, Oswald & Hahn, LLP

Mailing Address PO Box 657

City: Evansvilla State: IN Zip Code: 47704

Purpose of Disbursement: Legal

Category/Type: 001

Candidate Name:

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 19 / 2014

**Transaction ID : 6FE6FF6F-31CD-4122-B**

Amount of Each Disbursement this Period: 7465.62

**SUBTOTAL** of Disbursements This Page (optional) ▶ 8962.89

**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)
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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial)
Susan B Anthony List

Mailing Address 1707 L St., NW

City: Washington State: DC Zip Code: 20036

Purpose of Disbursement: In-Kind Donation of Media Consulting

Category/Type: 001

Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 31 / 2014

**Transaction ID : 7024D36A-9657-410F-A**

Amount of Each Disbursement this Period: 5000.00

**B.** Full Name (Last, First, Middle Initial)
VA Department of Taxation

Mailing Address PO Box 1115

City: Richmond State: VA Zip Code: 23218

Purpose of Disbursement: Taxes

Category/Type: 001

Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 01 / 2014

**Transaction ID : 724B7635-9701-4685-9**

Amount of Each Disbursement this Period: 209.39

**C.** Full Name (Last, First, Middle Initial)
Frank Cannon

Mailing Address 6217 Lee Highway

City: Arlington State: VA Zip Code: 22205

Purpose of Disbursement: Consulting

Category/Type: 001

Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 12 / 2014

**Transaction ID : 764CFEA2-F328-4039-9**

Amount of Each Disbursement this Period: 1100.00

**SUBTOTAL** of Disbursements This Page (optional) ▶ 6309.39

**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

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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Susan B Anthony List
Mailing Address: 1707 L St., NW
City: Washington State: DC Zip Code: 20036
Purpose of Disbursement: Reimbursement for Office Supplies
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 19 / 2014
Transaction ID : 7685DA1F-5AFB-48CF-B
Amount of Each Disbursement this Period: 502.00

**B.** Full Name (Last, First, Middle Initial): Mr. Mick Bransfield
Mailing Address: 12720 Builders Rd
City: Herndon State: VA Zip Code: 20170
Purpose of Disbursement: Consulting
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 05 / 2014
Transaction ID : 7D0C46DC-1496-4D75-8
Amount of Each Disbursement this Period: 5154.47

**C.** Full Name (Last, First, Middle Initial): IRS
Mailing Address: IRS
City: Cincinnati State: OH Zip Code: 45999
Purpose of Disbursement: Payroll Tax Expense
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2014
Transaction ID : 7D67E0FD-D292-4FCC-A
Amount of Each Disbursement this Period: 1801.90

**SUBTOTAL** of Disbursements This Page (optional) ▶ 7458.37

**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)
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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Fred O Russell
Mailing Address: 5425 Lavey lane
City: Baker State: LA Zip Code: 70714
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 08 / 2014
Transaction ID : 7FB419A5-9CA6-4DDD-B
Amount of Each Disbursement this Period: 37.47

**B.** Full Name (Last, First, Middle Initial): IRS
Mailing Address: IRS
City: Cincinnati State: OH Zip Code: 45999
Purpose of Disbursement: Payroll Tax Expense
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 08 / 2014
Transaction ID : 832BF23B-15E8-40A2-A
Amount of Each Disbursement this Period: 1882.93

**C.** Full Name (Last, First, Middle Initial): The Carlyle Gregory Company, LLC
Mailing Address: 140 Little Falls St. Suite 104
City: Falls Church State: VA Zip Code: 22046
Purpose of Disbursement: Consulting
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 19 / 2014
Transaction ID : 84F4BBED-1C80-42E9-A
Amount of Each Disbursement this Period: 2000.00

**SUBTOTAL** of Disbursements This Page (optional) ▶ 3920.40

**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

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Joanne Filiatreau
Mailing Address: 3 Putter Cove
City: Sherwood State: AR Zip Code: 72120
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 08 / 2014
Transaction ID : 854B349D-710F-4B31-B
Amount of Each Disbursement this Period: 515.34

**B.** Full Name (Last, First, Middle Initial): IRS
Mailing Address: IRS
City: Cincinnati State: OH Zip Code: 45999
Purpose of Disbursement: Payroll Taxes
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2014
Transaction ID : 85D4BBEE-34F5-494B-B
Amount of Each Disbursement this Period: 11771.59

**C.** Full Name (Last, First, Middle Initial): Mr. Kevin Shinault
Mailing Address: 175 Hillcrest Ct.
City: Pilot Mountian State: NC Zip Code: 27041
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 19 / 2014
Transaction ID : 87ACE99B-7F8B-49EC-B
Amount of Each Disbursement this Period: 223.96

**SUBTOTAL** of Disbursements This Page (optional) ▶ 12510.89

**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

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): IRS
Mailing Address: IRS
City: Cincinnati State: OH Zip Code: 45999
Purpose of Disbursement: Payroll Tax Expense
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 08 / 2014
Transaction ID : 8885D691-3F35-4668-A
Amount of Each Disbursement this Period: 127.83

**B.** Full Name (Last, First, Middle Initial): DC Unemployment Services
Mailing Address: 501 C St. NW #501
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: Payroll Tax Expense
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 22 / 2014
Transaction ID : 893F96BB-20FA-4CEF-A
Amount of Each Disbursement this Period: 68.73

**C.** Full Name (Last, First, Middle Initial): Mr. Mick Bransfield
Mailing Address: 12720 Builders Rd
City: Herndon State: VA Zip Code: 20170
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 08 / 2014
Transaction ID : 8B3E1E58-3A75-4058-8
Amount of Each Disbursement this Period: 601.65

**SUBTOTAL** of Disbursements This Page (optional) ▶ 798.21

**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)
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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): PayChex
Mailing Address: 911 Panorama Trail S
City: Rochester State: NY Zip Code: 14625
Purpose of Disbursement: Credit Card Processing
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 22 / 2014
Transaction ID : 8C73EC19-8056-42C5-9
Amount of Each Disbursement this Period: 209.86

**B.** Full Name (Last, First, Middle Initial): IRS
Mailing Address: IRS
City: Cincinnati State: OH Zip Code: 45999
Purpose of Disbursement: Payroll Tax Expense
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 22 / 2014
Transaction ID : 8C8C8D90-BEA4-43B0-8
Amount of Each Disbursement this Period: 186.53

**C.** Full Name (Last, First, Middle Initial): Discount Bankcard
Mailing Address: 21215 Burbank Blvd Suite 300
City: Woodland Hills State: CA Zip Code: 91367
Purpose of Disbursement: Credit Card Processing
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 13 / 2014
Transaction ID : 8F83A4D0-32E7-4A4D-8
Amount of Each Disbursement this Period: 1.90

**SUBTOTAL** of Disbursements This Page (optional) ▶ 398.29

**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)
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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Tami Fitzgerald
Mailing Address: 109 Carpathian Way
City: Raleigh State: NC Zip Code: 27615
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 12 / 2014
Transaction ID : 8FAACDC0-46F2-4066-A
Amount of Each Disbursement this Period: 705.72

**B.** Full Name (Last, First, Middle Initial): Mary Katherine Collins
Mailing Address: 15 1/2 Magnoila Circle
City: Searcy State: AR Zip Code: 72143
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 19 / 2014
Transaction ID : 91B60C4E-802A-4DC3-A
Amount of Each Disbursement this Period: 154.82

**C.** Full Name (Last, First, Middle Initial): Ms. Marie Guillot
Mailing Address: 207 N Demanade Blvd
City: Lafayette State: LA Zip Code: 70503
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2014
Transaction ID : 921B113A-3B56-4A08-B
Amount of Each Disbursement this Period: 684.62

**SUBTOTAL** of Disbursements This Page (optional) ▶ 1545.16

**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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Garland Honeycutt
Mailing Address: 1081 Fork Mountain
City: Bakersville State: NC Zip Code: 28705
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 12 / 2014
Transaction ID : 92E71340-9308-42A0-A
Amount of Each Disbursement this Period: 224.15

**B.** Full Name (Last, First, Middle Initial): LWCC
Mailing Address: 2237 South Acadian Thruway
City: Lafayette State: LA Zip Code: 70503
Purpose of Disbursement: Insurance
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 18 / 2014
Transaction ID : 93318387-A68F-48FC-A
Amount of Each Disbursement this Period: 4762.00

**C.** Full Name (Last, First, Middle Initial): Dueling Oak, LLC
Mailing Address: PO Box 1026
City: Madisonville State: LA Zip Code: 70447
Purpose of Disbursement: Rent
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 26 / 2014
Transaction ID : 94B2118E-E29F-47B6-9
Amount of Each Disbursement this Period: 950.00

**SUBTOTAL** of Disbursements This Page (optional) ▶ 5936.15

**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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial)
Mr. Francisco Gonzales

Mailing Address 3461 HWY 39

City: Braithwaite State: LA Zip Code: 70040

Purpose of Disbursement: Travel Reimbursement

Candidate Name

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 05 / 2014

Transaction ID : 968D3DF1-7A4D-4C1A-8

Amount of Each Disbursement this Period: 675.39

**B.** Full Name (Last, First, Middle Initial)
Discount Bankcard

Mailing Address 21215 Burbank Blvd
Suite 300

City: Woodland Hills State: CA Zip Code: 91367

Purpose of Disbursement: Credit Card Processing

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 12 / 2014

Transaction ID : 98B00A0D-1286-4E01-9

Amount of Each Disbursement this Period: 0.96

**C.** Full Name (Last, First, Middle Initial)
Mr. Kevin Shinault

Mailing Address 175 Hillcrest Ct.

City: Pilot Mountian State: NC Zip Code: 27041

Purpose of Disbursement: Travel Reimbursement

Candidate Name

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 26 / 2014

Transaction ID : 9ABC62D9-596B-4835-B

Amount of Each Disbursement this Period: 387.16

**SUBTOTAL** of Disbursements This Page (optional) ▶ 1063.51

**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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Tami Fitzgerald
Mailing Address: 109 Carpathian Way
City: Raleigh State: NC Zip Code: 27615
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 05 / 2014
Transaction ID : 9B1AC028-70D6-4266-8
Amount of Each Disbursement this Period: 302.34

**B.** Full Name (Last, First, Middle Initial): Susan B Anthony List
Mailing Address: 1707 L St., NW
City: Washington State: DC Zip Code: 20036
Purpose of Disbursement: Reimbursement for Meals
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 31 / 2014
Transaction ID : 9CFB6437-84E7-4655-8
Amount of Each Disbursement this Period: 1043.91

**C.** Full Name (Last, First, Middle Initial): Mary Katherine Collins
Mailing Address: 15 1/2 Magnoila Circle
City: Searcy State: AR Zip Code: 72143
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 12 / 2014
Transaction ID : 9E463D96-7C0D-47F8-A
Amount of Each Disbursement this Period: 186.30

**SUBTOTAL** of Disbursements This Page (optional) ▶ 1532.55

**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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): IRS
Mailing Address: IRS
City: Cincinnati State: OH Zip Code: 45999
Purpose of Disbursement: Payroll Taxes
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 08 / 2014
Transaction ID : 9E5C1EE8-C918-4918-8
Amount of Each Disbursement this Period: 284.50

**B.** Full Name (Last, First, Middle Initial): Ms. Marie Guillot
Mailing Address: 207 N Demanade Blvd
City: Lafayette State: LA Zip Code: 70503
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 05 / 2014
Transaction ID : A1AC9212-0754-479B-A
Amount of Each Disbursement this Period: 162.94

**C.** Full Name (Last, First, Middle Initial): Orleans Place, LLC
Mailing Address: PO Box 52592
City: Lafayette State: LA Zip Code: 70505
Purpose of Disbursement: Rent
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 26 / 2014
Transaction ID : A2DD9CE2-4709-4F44-B
Amount of Each Disbursement this Period: 900.00

**SUBTOTAL** of Disbursements This Page (optional) ▶ 1347.44

**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

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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): PayChex
Mailing Address: 911 Panorama Trail S
City: Rochester State: NY Zip Code: 14625
Purpose of Disbursement: Credit Card Processing
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2014
Transaction ID : A5998FFD-2005-4E0A-9
Amount of Each Disbursement this Period: 62.81

**B.** Full Name (Last, First, Middle Initial): Susan B Anthony List
Mailing Address: 1707 L St., NW
City: Washington State: DC Zip Code: 20036
Purpose of Disbursement: In-Kind Donation Of Office
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 31 / 2014
Transaction ID : A8BE2AD6-81CB-43A4-A
Amount of Each Disbursement this Period: 2384.59

**C.** Full Name (Last, First, Middle Initial): Mr. Eric Soderstrom
Mailing Address: 148 Berry Mountian Rd
City: Cramerton State: NC Zip Code: 28032
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2014
Transaction ID : A8CC1869-BB44-4FE9-B
Amount of Each Disbursement this Period: 2309.81

**SUBTOTAL** of Disbursements This Page (optional) ▶ 4757.21

**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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Discount Bankcard
Mailing Address: 21215 Burbank Blvd, Suite 300
City: Woodland Hills State: CA Zip Code: 91367
Purpose of Disbursement: Credit Card Processing
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 15 / 2014
Transaction ID : A8EF6D07-A716-4320-B
Amount of Each Disbursement this Period: 0.95

**B.** Full Name (Last, First, Middle Initial): Discount Bankcard
Mailing Address: 21215 Burbank Blvd, Suite 300
City: Woodland Hills State: CA Zip Code: 91367
Purpose of Disbursement: Credit Card Processing
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 11 / 2014
Transaction ID : A901C3EB-BA96-4FD6-B
Amount of Each Disbursement this Period: 12.30

**C.** Full Name (Last, First, Middle Initial): Jennifer Gross
Mailing Address: 1707 L St, NW
City: Washington State: DC Zip Code: 20036
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2014
Transaction ID : AA095CF0-4845-4386-B
Amount of Each Disbursement this Period: 1717.42

**SUBTOTAL** of Disbursements This Page (optional) ▶ 1730.67

**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

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial)
Ms. Marie Guillot

Mailing Address 207 N Demanade Blvd

City: Lafayette State: LA Zip Code: 70503

Purpose of Disbursement: Travel Reimbursement

Candidate Name

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 26 / 2014

Transaction ID : ADEAE8F5-7C1B-4306-B

Amount of Each Disbursement this Period: 56.15

**B.** Full Name (Last, First, Middle Initial)
Julie Harris

Mailing Address 3654 Tara Street

City: Springdale State: AR Zip Code: 72762

Purpose of Disbursement: Salary

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 29 / 2014

Transaction ID : AF13A010-FBA0-4E79-9

Amount of Each Disbursement this Period: 2501.75

**C.** Full Name (Last, First, Middle Initial)
Ms. Ruth Wisher

Mailing Address 515 Gardere Lane
Apt 215

City: Baton Rouge State: LA Zip Code: 70820

Purpose of Disbursement: Travel Reimbursement

Candidate Name

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 26 / 2014

Transaction ID : B15E1CA9-55FF-4C68-9

Amount of Each Disbursement this Period: 341.70

**SUBTOTAL** of Disbursements This Page (optional) ▶ 2899.60

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

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

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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Jay Canella
Mailing Address: 3914 Lake Sherwood Ave
City: East Batoun Rouge State: LA Zip Code: 70816
Purpose of Disbursement: Rent
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 05 / 2014
Amount of Each Disbursement this Period: 1000.00
**Transaction ID : B4C8BACB-3089-455B-9**

**B.** Full Name (Last, First, Middle Initial): Mr. Kevin Shinault
Mailing Address: 175 Hillcrest Ct.
City: Pilot Mountian State: NC Zip Code: 27041
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 05 / 2014
Amount of Each Disbursement this Period: 206.01
**Transaction ID : B5D04A64-1303-4309-9**

**C.** Full Name (Last, First, Middle Initial): DC Unemployment Services
Mailing Address: 501 C St. NW #501
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: Payroll Tax Expense
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2014
Amount of Each Disbursement this Period: 964.73
**Transaction ID : B71085D1-4C34-4BA8-8**

**SUBTOTAL** of Disbursements This Page (optional) ▶ 2170.74

**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

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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Discount Bankcard
Mailing Address: 21215 Burbank Blvd, Suite 300
City: Woodland Hills State: CA Zip Code: 91367
Purpose of Disbursement: Credit Card Processing
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 14 / 2014
Transaction ID : BB66C904-C772-487E-9
Amount of Each Disbursement this Period: 0.95

**B.** Full Name (Last, First, Middle Initial): Webster, Chamberlain & Bean
Mailing Address: 1747 Pennsylavania Ave, NW
City: Washington State: DC Zip Code: 20006
Purpose of Disbursement: Legal
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 19 / 2014
Transaction ID : BCC4534D-C527-465F-9
Amount of Each Disbursement this Period: 457.00

**C.** Full Name (Last, First, Middle Initial): Mr. Grayson Greco
Mailing Address: 115 Wyndham Way
City: Wilmington State: NC Zip Code: 24811
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2014
Transaction ID : BFE44864-1A91-4563-B
Amount of Each Disbursement this Period: 1358.25

**SUBTOTAL** of Disbursements This Page (optional) ▶ 1816.20

**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

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Intuit
Mailing Address: 2632 Marine Way
City: Mountain View State: CA Zip Code: 94042
Purpose of Disbursement: Credit Card Processing
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 04 / 2014
Transaction ID : C2662687-FC8C-49A7-9
Amount of Each Disbursement this Period: 15.95

**B.** Full Name (Last, First, Middle Initial): VA Department of Taxation
Mailing Address: PO Box 1115
City: Richmond State: VA Zip Code: 23218
Purpose of Disbursement: Taxes
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 01 / 2014
Transaction ID : C281D37E-83A8-4BD0-A
Amount of Each Disbursement this Period: 103.34

**C.** Full Name (Last, First, Middle Initial): PayChex
Mailing Address: 911 Panorama Trail S
City: Rochester State: NY Zip Code: 14625
Purpose of Disbursement: Credit Card Processing
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 22 / 2014
Transaction ID : C6358794-C543-4132-8
Amount of Each Disbursement this Period: 38.30

**SUBTOTAL** of Disbursements This Page (optional) ▶ 157.59

**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

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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): David Hostetler
Mailing Address: 215 N Main St
City: Belmont State: NC Zip Code: 28012
Purpose of Disbursement: Rent
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 26 / 2014
Transaction ID : C733EA72-7871-41A0-8
Amount of Each Disbursement this Period: 900.00

**B.** Full Name (Last, First, Middle Initial): Hope M Miller
Mailing Address: 1966 Cherokee Street
City: Baton Rouge State: LA Zip Code: 70806
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2014
Transaction ID : C735695C-7237-4681-9
Amount of Each Disbursement this Period: 669.30

**C.** Full Name (Last, First, Middle Initial): PayChex
Mailing Address: 911 Panorama Trail S
City: Rochester State: NY Zip Code: 14625
Purpose of Disbursement: Credit Card Processing
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 08 / 2014
Transaction ID : C79D3074-0664-4B08-A
Amount of Each Disbursement this Period: 224.24

**SUBTOTAL** of Disbursements This Page (optional) ▶ 1793.54

**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

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Julie Harris
Mailing Address: 3654 Tara Street
City: Springdale State: AR Zip Code: 72762
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 19 / 2014
Transaction ID : CA3D13F8-0280-408D-A
Amount of Each Disbursement this Period: 223.53

**B.** Full Name (Last, First, Middle Initial): Authorize.Net
Mailing Address: PO Box 947
City: American Fork State: UT Zip Code: 84003
Purpose of Disbursement: Credit Card Processing
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 04 / 2014
Transaction ID : CB3F857F-C7F2-412B-8
Amount of Each Disbursement this Period: 41.30

**C.** Full Name (Last, First, Middle Initial): Douglas Young
Mailing Address: 65 Crimson Laurel Way
City: Bakersville State: NC Zip Code: 28705
Purpose of Disbursement: Rent
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 26 / 2014
Transaction ID : CC64DF61-29E1-4353-A
Amount of Each Disbursement this Period: 700.00

**SUBTOTAL** of Disbursements This Page (optional) ▶ 964.83

**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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.**
Full Name (Last, First, Middle Initial): IRS
Mailing Address: IRS
City: Cincinnati State: OH Zip Code: 45999
Purpose of Disbursement: Payroll Tax Expense
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 22 / 2014
Transaction ID : CCBC2A38-76EE-45C6-B
Amount of Each Disbursement this Period: 1973.01

**B.**
Full Name (Last, First, Middle Initial): Mr. Kevin Shinault
Mailing Address: 175 Hillcrest Ct.
City: Pilot Mountian State: NC Zip Code: 27041
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2014
Transaction ID : CF537610-5AC4-4C44-A
Amount of Each Disbursement this Period: 2363.75

**C.**
Full Name (Last, First, Middle Initial): Highway 10 Office Park, LLC
Mailing Address: 1 Allied Drive, Suite 1500
City: Little Rock State: AR Zip Code: 72202
Purpose of Disbursement: Rent
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 26 / 2014
Transaction ID : CFCE439B-4288-493C-B
Amount of Each Disbursement this Period: 850.00

**SUBTOTAL** of Disbursements This Page (optional) ▶ 5186.76

**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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Susan B Anthony List
Mailing Address: 1707 L St., NW
City: Washington State: DC Zip Code: 20036
Purpose of Disbursement: In-Kind Donation of Salaries
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 31 / 2014
Transaction ID : D0813A15-B3D4-41B9-A
Amount of Each Disbursement this Period: 14852.00

**B.** Full Name (Last, First, Middle Initial): Garland Honeycutt
Mailing Address: 1081 Fork Mountain
City: Bakersville State: NC Zip Code: 28705
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 26 / 2014
Transaction ID : D201FB0A-4851-4DB0-8
Amount of Each Disbursement this Period: 347.33

**C.** Full Name (Last, First, Middle Initial): Emily Buchanan
Mailing Address: 1707 L St, NW Suite 550
City: Washington State: DC Zip Code: 20036
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2014
Transaction ID : D949B48C-2A07-44E3-B
Amount of Each Disbursement this Period: 1268.16

**SUBTOTAL** of Disbursements This Page (optional) ▶ 16467.49

**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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): AT&T
Mailing Address: PO Box 657
City: Evansvilla State: IN Zip Code: 47704
Purpose of Disbursement: Telephones
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 05 / 2014
Transaction ID : DF86E01D-F4CC-4C17-A
Amount of Each Disbursement this Period: 3947.62

**B.** Full Name (Last, First, Middle Initial): Joanne Filiatreau
Mailing Address: 3 Putter Cove
City: Sherwood State: AR Zip Code: 72120
Purpose of Disbursement: Salary
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2014
Transaction ID : E0FBFDBB-00E8-42FD-8
Amount of Each Disbursement this Period: 1750.33

**C.** Full Name (Last, First, Middle Initial): Mr. Grayson Greco
Mailing Address: 115 Wyndham Way
City: Wilmington State: NC Zip Code: 24811
Purpose of Disbursement: Travel Reimbursement
Category/Type: 002
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 08 / 2014
Transaction ID : E4E616C7-F924-4452-A
Amount of Each Disbursement this Period: 337.18

**SUBTOTAL** of Disbursements This Page (optional) ▶ 6035.13

**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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Andresen Blom
Mailing Address: 101 Asbury Ct.
City: Winchester State: VA Zip Code: 22602
Purpose of Disbursement: Consulting
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 26 / 2014
Transaction ID : E508CD93-CC73-4D9D-8
Amount of Each Disbursement this Period: 5000.00

**B.** Full Name (Last, First, Middle Initial): Mr. Grayson Greco
Mailing Address: 115 Wyndham Way
City: Wilmington State: NC Zip Code: 24811
Purpose of Disbursement: Travel Reimbursement
Category/Type: 002
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 05 / 2014
Transaction ID : EC682145-0057-4180-8
Amount of Each Disbursement this Period: 191.95

**C.** Full Name (Last, First, Middle Initial): Joanne Filiatreau
Mailing Address: 3 Putter Cove
City: Sherwood State: AR Zip Code: 72120
Purpose of Disbursement: Travel Reimbursement
Category/Type: 002
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 05 / 2014
Transaction ID : ED0F0E11-E863-4EA9-8
Amount of Each Disbursement this Period: 690.29

**SUBTOTAL** of Disbursements This Page (optional) ▶ 5882.24

**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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial)
DC Unemployment Services

Mailing Address 501 C St. NW #501

City: Washington
State: DC
Zip Code: 20001

Purpose of Disbursement: Payroll Tax Expense

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 15 / 2014

Transaction ID : ED1E1277-EA45-49D8-B

Amount of Each Disbursement this Period: 686.43

**B.** Full Name (Last, First, Middle Initial)
Julie Harris

Mailing Address 3654 Tara Street

City: Springdale
State: AR
Zip Code: 72762

Purpose of Disbursement: Travel Reimbursement

Candidate Name:

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 05 / 2014

Transaction ID : ED3DE02C-0739-4B14-9

Amount of Each Disbursement this Period: 66.58

**C.** Full Name (Last, First, Middle Initial)
Centrex Properties

Mailing Address 4040 Ed Drive
Suite 210

City: Raleigh
State: NC
Zip Code: 27607

Purpose of Disbursement: Utilities

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 26 / 2014

Transaction ID : EF1DD579-BC79-4091-8

Amount of Each Disbursement this Period: 1200.00

**SUBTOTAL** of Disbursements This Page (optional) ▶ 1953.01

**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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): PayChex
Mailing Address: 911 Panorama Trail S
City: Rochester State: NY Zip Code: 14625
Purpose of Disbursement: Credit Card Processing
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 08 / 2014
Transaction ID : EFED56A2-3E17-4D23-A
Amount of Each Disbursement this Period: 38.30

**B.** Full Name (Last, First, Middle Initial): Taylor Wilson
Mailing Address: 6300 terra verde dr
City: Raleigh State: NC Zip Code: 27609
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 26 / 2014
Transaction ID : EFFF0287-9175-40D2-9
Amount of Each Disbursement this Period: 139.27

**C.** Full Name (Last, First, Middle Initial): Mr. Francisco Gonzales
Mailing Address: 3461 HWY 39
City: Braithwaite State: LA Zip Code: 70040
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 12 / 2014
Transaction ID : F0B489CE-973F-4D6A-8
Amount of Each Disbursement this Period: 26.88

**SUBTOTAL** of Disbursements This Page (optional) ▶ 204.45

**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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial): Discount Bankcard
Mailing Address: 21215 Burbank Blvd, Suite 300
City: Woodland Hills State: CA Zip Code: 91367
Purpose of Disbursement: Credit Card Processing
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 11 / 2014
Transaction ID : F3CF2C08-C0D6-4CD4-8
Amount of Each Disbursement this Period: 2.86

**B.** Full Name (Last, First, Middle Initial): Majority Connections
Mailing Address: 10 Pinnacle Rd
City: Durham State: NC Zip Code: 27705
Purpose of Disbursement: Consulting
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 05 / 2014
Transaction ID : F867269A-AF6B-4FA6-A
Amount of Each Disbursement this Period: 2000.00

**C.** Full Name (Last, First, Middle Initial): DC Unemployment Services
Mailing Address: 501 C St. NW #501
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: Payroll Tax Expense
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 22 / 2014
Transaction ID : FADD380E-256C-4D05-A
Amount of Each Disbursement this Period: 693.63

**SUBTOTAL** of Disbursements This Page (optional) ▶ 2696.49

**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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

**A.** Full Name (Last, First, Middle Initial)
Susan B Anthony List

Mailing Address 1707 L St., NW

City: Washington State: DC Zip Code: 20036

Purpose of Disbursement: Reimbursement for Conference Calls

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 31 / 2014

Transaction ID : FB3BB7EE-5581-4553-A

Amount of Each Disbursement this Period: 433.01

**B.** Full Name (Last, First, Middle Initial)
Mr. Eric Soderstrom

Mailing Address 148 Berry Mountian Rd

City: Cramerton State: NC Zip Code: 28032

Purpose of Disbursement: Travel Reimbursement

Candidate Name:

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 26 / 2014

Transaction ID : FB6EBF80-4756-4D8B-8

Amount of Each Disbursement this Period: 927.21

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

Mailing Address IRS

City: Cincinnati State: OH Zip Code: 45999

Purpose of Disbursement: Payroll Tax Expense

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 15 / 2014

Transaction ID : FBE3D0B9-7F71-4421-A

Amount of Each Disbursement this Period: 1952.43

**SUBTOTAL** of Disbursements This Page (optional) ▶ 3312.65

**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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

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

Mailing Address 18 Fairhaven road

City: Nashua State: NH Zip Code: 03060

Purpose of Disbursement: Travel Reimbursement

Candidate Name

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 19 / 2014

Transaction ID : FC0556FC-61D8-4BB8-8

Amount of Each Disbursement this Period: 485.46

**B.** Full Name (Last, First, Middle Initial)
Beene Office Park, LLC

Mailing Address 2250 Hospital Drive
Suite 220

City: Bossier City State: LA Zip Code: 71111

Purpose of Disbursement: Rent

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 26 / 2014

Transaction ID : FC6CB733-BD02-4CF9-B

Amount of Each Disbursement this Period: 911.00

**C.** Full Name (Last, First, Middle Initial)
Joanne Filiatreau

Mailing Address 3 Putter Cove

City: Sherwood State: AR Zip Code: 72120

Purpose of Disbursement: Travel Reimbursement

Candidate Name

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 26 / 2014

Transaction ID : FE10F2FB-E297-4843-A

Amount of Each Disbursement this Period: 174.46

**SUBTOTAL** of Disbursements This Page (optional) ▶ 1570.92

**TOTAL** This Period (last page this line number only) ▶ 174304.78

Image# 15951377349

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kassidy L Tyer

Mailing Address 41 Hawk Hollow Trail

City: Burgaw State: NC Zip Code: 28425

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 5.00

**Transaction ID : f9035a5f-7eee-41bc-b**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kassidy L Tyer

Mailing Address 41 Hawk Hollow Trail

City: Burgaw State: NC Zip Code: 28425

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 6.00

**Transaction ID : 78d587ed-5abd-4fcf-8**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 11.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951377350

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gabriella E Hansen

Mailing Address 310 West Meath Drive

City: Winterville State: NC Zip Code: 28590

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 20.00

**Transaction ID : 75f30420-bdff-4989-a**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Gabriella E Hansen

Mailing Address 310 West Meath Drive

City: Winterville State: NC Zip Code: 28590

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 12.90

**Transaction ID : eb0e9ad1-c859-41cb-a**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 32.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377351

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City Charlotte | State NC | Zip Code 23215

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
30.00

**Transaction ID : dfff913b-bf50-4e2b-9**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City Charlotte | State NC | Zip Code 23215

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
12.60

**Transaction ID : a7c08094-5ccb-4e5d-a**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 42.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377352

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City Spindale | State NC | Zip Code 28160

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
50.00

**Transaction ID : 1d66ae45-423f-4001-8**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City Spindale | State NC | Zip Code 28160

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
2.91

**Transaction ID : c59bc615-7bca-4473-9**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 52.91

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377353

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rebecca Deucher

Mailing Address 4800 Vass Carthage Rd

City: Carthage State: NC Zip Code: 28394

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 50.00

**Transaction ID : e765238c-e5cd-4afb-a**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rebecca Deucher

Mailing Address 4800 Vass Carthage Rd

City: Carthage State: NC Zip Code: 28394

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 17.40

**Transaction ID : dd15fa32-adb5-44c8-8**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 67.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Chassidy Menard

Mailing Address 515 Walter Dr.

City: Lafayette State: LA Zip Code: 70507

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 50.00

**Transaction ID : 7aba3b81-b60a-4ba9-a**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Chassidy Menard

Mailing Address 515 Walter Dr.

City: Lafayette State: LA Zip Code: 70507

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 4.50

**Transaction ID : 36153995-11ee-4900-a**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 54.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377355

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Laura U Logie

Mailing Address 2565 Shire Circle

City Harrisonburg State VA Zip Code 22801

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
20.00

**Transaction ID : 7899306f-c22e-41f9-b**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Antoinette Franklin

Mailing Address 8822 Apple St

City New Orleans State LA Zip Code 70188

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
55.00

**Transaction ID : 79adae4e-187f-4142-b**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 75.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377356

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francesca Blom

Mailing Address 101 Asbury Ct

City Winchester | State VA | Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
80.00

**Transaction ID : a202ed03-9ddb-41d4-b**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ky Broussard

Mailing Address 301 N Cedar Street

City Abbeville | State LA | Zip Code 70510

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
30.00

**Transaction ID : f42ae4e4-321e-41b3-9**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 110.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377357

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ky Broussard

Mailing Address 301 N Cedar Street

City Abbeville State LA Zip Code 70510

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
13.50

**Transaction ID : a6644801-c253-4374-9**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Wayne Burckel

Mailing Address 46 Glenwood Ave

City Harahan State LA Zip Code 70123

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
20.00

**Transaction ID : a2d3850d-6e32-41d5-9**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 33.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377358

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Wayne Burckel

Mailing Address 46 Glenwood Ave

City Harahan | State LA | Zip Code 70123

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
0.30

**Transaction ID : 6c8d2bdb-9678-4ec9-8**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shelby J Davis

Mailing Address 6414 The Divide Pkwy
Apt 204

City Little Rock | State AR | Zip Code 72223

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
30.00

**Transaction ID : fbd69c2f-c734-426a-a**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 30.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shelby J Davis

Mailing Address
6414 The Divide Pkwy
Apt 204

City: Little Rock
State: AR
Zip Code: 72223

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 15.30

**Transaction ID : 7a69071f-a32b-4d20-a**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Louisianna Right to Life Federation

Mailing Address
7121 Catina Street

City: New Orleans
State: LA
Zip Code: 70124

Purpose of Expenditure: List Rental
Category/Type: 004

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 566.67

**Transaction ID : 45074a1c-c3dd-478b-b**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 581.97

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377360

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jodi Fountain

Mailing Address 1010 S Dogwood Drive

City: Bogalusa State: LA Zip Code: 70427

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 25.00

**Transaction ID : 646dbda2-b66f-49b0-9**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jodi Fountain

Mailing Address 1010 S Dogwood Drive

City: Bogalusa State: LA Zip Code: 70427

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 20.00

**Transaction ID : 3d432645-3210-42fc-b**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 45.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377361

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 90.00

**Transaction ID : a4f04382-a701-4150-9**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 13.50

**Transaction ID : 18126f8d-c9c4-4a4a-9**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 103.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377362

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 40.00

**Transaction ID : fb8f4049-cb06-40c2-a**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 3.36

**Transaction ID : e52a0b64-1ca6-44b4-a**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 43.36

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377363

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Trent C Oelschlaeger

Mailing Address 18710 Strawberry Plant Road

City: Fayetteville State: AR Zip Code: 72704

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 37.00

**Transaction ID : 1dd6ffe4-b93c-44e2-b**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Trent C Oelschlaeger

Mailing Address 18710 Strawberry Plant Road

City: Fayetteville State: AR Zip Code: 72704

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 16.80

**Transaction ID : 753766e4-a159-4ec0-a**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 53.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Morgan R Padgett

Mailing Address 2164 Kay Rd

City Greenville State NC Zip Code 27858

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
20.00

**Transaction ID : 9777c7b2-1d92-49aa-9**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Reagan Brackett

Mailing Address 502 E Center Ave

City Searcy State AR Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
50.00

**Transaction ID : 82a57144-247d-4e75-b**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 70.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Reagan Brackett

Mailing Address 502 E Center Ave

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
17.49

**Transaction ID : 3770eb1e-594e-444f-9**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Corey Miller

Mailing Address 8617 Riley Hills Rd

City Zebulon | State NC | Zip Code 27597

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
50.00

**Transaction ID : 31ca9065-a3ee-48ae-8**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 67.49

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Corey Miller

Mailing Address 8617 Riley Hills Rd

City Zebulon | State NC | Zip Code 27597

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
8.10

**Transaction ID : df9fb173-222b-442d-8**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Warren Gravois

Mailing Address 16005 7th St

City Pearlington | State MS | Zip Code 39572

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
25.00

**Transaction ID : 4b553e60-0196-4ec8-8**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 33.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377367

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Warren Gravois

Mailing Address 16005 7th St

City: Pearlington State: MS Zip Code: 39572

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 1.95

**Transaction ID : dd8cd586-3416-4e91-a**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carol L Walters

Mailing Address 1900 Glen West Way

City: Fort Smith State: AR Zip Code: 72916

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 60.00

**Transaction ID : 5cc90df1-9111-40a4-9**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 61.95

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377368

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carol L Walters

Mailing Address 1900 Glen West Way

City: Fort Smith State: AR Zip Code: 72916

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 6.30

**Transaction ID : abd9aa35-913b-4fbe-b**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City: Shreveport State: LA Zip Code: 71119

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 60.00

**Transaction ID : 363edb1d-77c8-4283-8**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 66.30

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377369

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
17.10

**Transaction ID : 16040a7d-0eaa-4785-b**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Marysol Netro

Mailing Address 312 S Gunter St

City Siloam Springs State AR Zip Code 72761

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
60.00

**Transaction ID : 9adf5290-05d1-4ea8-b**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 77.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377370

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Dylan Simon

Mailing Address 111 Millrock Drive

City Lafayette | State LA | Zip Code 70508

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
41.17

**Transaction ID : 8d720e2e-7db8-49bc-8**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Dylan Simon

Mailing Address 111 Millrock Drive

City Lafayette | State LA | Zip Code 70508

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
3.75

**Transaction ID : 680410f6-6eaa-43ff-a**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 44.92

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City Ville Platte | State LA | Zip Code 70586

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
60.00

**Transaction ID : a9d295ea-86b0-4ecd-9**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City Ville Platte | State LA | Zip Code 70586

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
30.60

**Transaction ID : 2fe913ad-0778-46cd-8**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 90.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 80.00

**Transaction ID : d6feaf5f-058f-43fc-a**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 60.00

**Transaction ID : 29a85074-2b03-44e3-8**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 140.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney D Culbreth

Mailing Address
100 Asbury CT
3200 Dam Neck Rd

City: Winchester
State: VA
Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 80.00

**Transaction ID : 988808e9-6adc-47b3-8**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rze Culbreath

Mailing Address
100 Asbury Ct

City: Winchester
State: VA
Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 80.00

**Transaction ID : 2dea9876-e610-4a84-a**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 160.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City Winchester | State VA | Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
80.00

**Transaction ID : e018c2e2-2fae-4cf5-a**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City Sterling | State VA | Zip Code 20165

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
40.00

**Transaction ID : 94d435e5-780b-489a-a**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 120.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377375

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jazmine d Conner

Mailing Address 100 ASBURY CT

City WINCHESTER State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
60.00

**Transaction ID : 9581f31e-c293-45ba-8**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Eric J Smith

Mailing Address 4967 Dysartville

City Morganton State NC Zip Code 28655

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
80.00

**Transaction ID : 728338ca-24cf-424f-9**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 140.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 80.00

**Transaction ID : 59978bdc-6edc-4e7b-9**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 6.90

**Transaction ID : cd0775be-8556-4c39-8**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 86.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
40.00

**Transaction ID : 8694956d-aad6-4f8c-8**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
16.20

**Transaction ID : 8d621b17-b566-4455-b**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 56.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 90.00

**Transaction ID : 7bcb572c-15b5-40e8-a**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 15.60

**Transaction ID : 6e3e1cbe-e783-46f7-8**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 105.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 30.00

**Transaction ID : c23b064f-aa4e-4010-8**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 1.08

**Transaction ID : b21d4443-34ad-4820-9**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 31.08

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Elizabeth Allison

Mailing Address 157 Bishop Drive

City: Avondale State: LA Zip Code: 70094

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 17.20

**Transaction ID : 59397add-e88d-4bc8-8**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Laura Rose Porter

Mailing Address 227 Fairgrounds Road

City: Natchitoches State: LA Zip Code: 71457

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 17.20

**Transaction ID : 4df12104-974c-45b7-b**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 34.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377381

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Laura Rose Porter

Mailing Address 227 Fairgrounds Road

City: Natchitoches State: LA Zip Code: 71457

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 2.70

**Transaction ID : 9771c369-2239-4752-8**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Alexa S Dudley

Mailing Address 4367 Splitlog Rd

City: Goodman State: MO Zip Code: 64843

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 45.00

**Transaction ID : b6c69e02-8e62-4585-8**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 47.70

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Alexa S Dudley

Mailing Address 4367 Splitlog Rd

City: Goodman State: MO Zip Code: 64843

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 28.50

**Transaction ID : 8c0545f7-1a23-4be5-b**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Sarinda S Dudley

Mailing Address 4367 Splitlog Rd

City: Goodman State: MO Zip Code: 64843

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 45.00

**Transaction ID : a9ca8621-b018-4265-9**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 73.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 50.00

**Transaction ID : d0c21ec8-6655-4f46-b**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 4.80

**Transaction ID : 73b8b37f-8273-45b5-b**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 54.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377384

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Charity Zerbel

Mailing Address 804 Mary Ave

City Neosho | State MO | Zip Code 64850

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
80.00

**Transaction ID : b9043923-3153-491f-8**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Charity Zerbel

Mailing Address 804 Mary Ave

City Neosho | State MO | Zip Code 64850

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
27.00

**Transaction ID : 06207998-ddd2-4e0f-a**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 107.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377385

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Sherri Zerbel

Mailing Address 804 Mary Ave

City: Neasho State: MO Zip Code: 64850

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 80.00

**Transaction ID : fc8c105e-01de-40b1-b**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Sherri Zerbel

Mailing Address 804 Mary Ave

City: Neasho State: MO Zip Code: 64850

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 27.00

**Transaction ID : 3ff322bd-e0d5-4d5f-9**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 107.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
55.00

**Transaction ID : f4a5d642-9aaf-4ae0-a**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
16.50

**Transaction ID : d8b3e43a-535c-4a43-a**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 71.50

(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.

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Beverly Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
55.00

**Transaction ID : 099e1a00-380c-4937-9**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City Kenner State LA Zip Code 70065

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 01 / 2014

Amount
75.00

**Transaction ID : ffe90a29-66b2-4e79-8**

Date of Disbursement or Obligation
08 / 01 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 130.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377388

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City: Kenner State: LA Zip Code: 70065

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 12.06

**Transaction ID : 8437c538-b0c5-46d1-b**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 50.00

**Transaction ID : 515481d5-c033-41a6-9**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 62.06

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377389

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 10.50

**Transaction ID : 941f912f-0104-4950-9**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Amelia Brackett

Mailing Address 804 Roundabout Circle

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 50.00

**Transaction ID : 84acd48e-ed7b-4ca6-9**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 60.50

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amelia Brackett

Mailing Address 804 Roundabout Circle

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 18.90

**Transaction ID : 151d30de-e648-485d-b**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tarrin Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 70.00

**Transaction ID : 0c33a7da-12e4-45e0-9**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 88.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377391

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tarrin Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 6.90

**Transaction ID : 48a55061-e6ea-470c-a**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Evelyn Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 70.00

**Transaction ID : 5f5e7cab-e77d-46b3-a**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 76.90

**(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.

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951377392

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Evelyn Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 6.90

**Transaction ID : e70c6195-ef3c-46c9-9**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brandon Guttuso

Mailing Address 3013 Transcontinental Dr

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 70.00

**Transaction ID : 3e4f4719-dfa6-4769-9**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 76.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brandon Guttuso

Mailing Address 3013 Transcontinental Dr

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 6.90

**Transaction ID : 3ee0d41f-7b28-4400-b**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 80.00

**Transaction ID : e0115c46-d971-48d8-9**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 86.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 01 / 2014

Amount: 28.20

**Transaction ID : 3df0efd8-7db7-45bd-8**

Date of Disbursement or Obligation: 08 / 01 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 80.00

**Transaction ID : 7e9ecbc3-00d3-4cd2-b**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 108.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377395

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 12.00

**Transaction ID : cc6e9568-8e12-4616-b**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 15.00

**Transaction ID : 94320694-4cd0-47d1-a**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 27.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 3.00

**Transaction ID : b8f7fd29-82f5-4e3e-8**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Andrew Shiver

Mailing Address 110 Earlston Ct

City: Knightdale State: NC Zip Code: 27545

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 75.00

**Transaction ID : af7e6da5-c7af-4ab5-a**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 78.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377397

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Andrew Shiver

Mailing Address 110 Earlston Ct

City Knightdale | State NC | Zip Code 27545

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
20.40

**Transaction ID : 87639995-5caa-488a-9**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City Search | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
40.00

**Transaction ID : 2abf7d4e-34bd-47e9-b**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 60.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377398

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City: Search | State: AR | Zip Code: 72149

Purpose of Expenditure: Mileage | Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 10.20

**Transaction ID : f66b8e57-88c5-4bfa-9**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Caleb Craig

Mailing Address 1410 Bushville drive

City: Lenoir | State: NC | Zip Code: 28645

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 10.00

**Transaction ID : c8e0106e-012f-47dd-a**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 20.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Caleb Craig

Mailing Address 1410 Bushville drive

City: Lenoir State: NC Zip Code: 28645

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 9.00

**Transaction ID : 4681f89a-8621-48d0-9**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 35.00

**Transaction ID : 75331259-eb7c-4aa8-a**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 44.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377400

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 29.10

**Transaction ID : 46a4f4eb-afc7-4622-9**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeremy Hollar

Mailing Address 121 Meadowview Drive

City: Boone State: NC Zip Code: 28607

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 10.00

**Transaction ID : 1b9616cf-c897-4c36-9**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 39.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377401

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeremy Hollar

Mailing Address 121 Meadowview Drive

City: Boone State: NC Zip Code: 28607

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 9.00

**Transaction ID : c8a30919-ab94-4179-9**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 80.00

**Transaction ID : bfd8c451-c888-4a64-a**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377402

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 10.50

**Transaction ID : 81739dc0-5fc3-485f-9**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Laura U Logie

Mailing Address 2565 Shire Circle

City: Harrisonburg State: VA Zip Code: 22801

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 15.00

**Transaction ID : a137ed98-64e3-4a32-b**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 25.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377403

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Benjamin Hernandez

Mailing Address 915 E Market Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
55.00

**Transaction ID : b50a775a-7af1-4cd2-b**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Benjamin Hernandez

Mailing Address 915 E Market Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
24.00

**Transaction ID : 30a20acf-2a2a-4a86-9**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 79.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377404

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City Shelby | State NC | Zip Code 28152

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
34.00

**Transaction ID : 76eb929a-b334-4ff9-b**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City Shelby | State NC | Zip Code 28152

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
16.80

**Transaction ID : daf9c2c1-546f-467e-b**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 50.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377405

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City: Wilmington State: NC Zip Code: 28405

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 40.00

**Transaction ID : d9b6f359-8d1b-4e47-a**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City: Wilmington State: NC Zip Code: 28405

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 10.80

**Transaction ID : 7046d43f-adf0-41dd-b**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 50.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377406

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City Raleigh | State NC | Zip Code 27610

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
20.00

**Transaction ID : 1631b28b-d3dd-4cfd-b**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City Raleigh | State NC | Zip Code 27610

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
3.60

**Transaction ID : dc13842d-18b5-4e1a-b**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 23.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377407

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Chassidy Menard

Mailing Address 515 Walter Dr.

City: Lafayette State: LA Zip Code: 70507

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 20.00

**Transaction ID : 77719d87-bcf5-4360-a**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Chassidy Menard

Mailing Address 515 Walter Dr.

City: Lafayette State: LA Zip Code: 70507

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 8.10

**Transaction ID : 45b38075-a77b-498d-a**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 28.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jonathan Odette

Mailing Address 9600 Earpsboro Chamblee Road

City: Wendell State: NC Zip Code: 27591

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 40.00

**Transaction ID : 77703036-1037-4a3c-b**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jonathan Odette

Mailing Address 9600 Earpsboro Chamblee Road

City: Wendell State: NC Zip Code: 27591

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 22.20

**Transaction ID : 508c5125-941d-41c2-b**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 62.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377409

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Cory Bryson

Mailing Address 216 Dogwood Ln

City Belmont | State NC | Zip Code 28012

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
50.00

**Transaction ID : b1c7acf3-c947-443c-8**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Cory Bryson

Mailing Address 216 Dogwood Ln

City Belmont | State NC | Zip Code 28012

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
10.50

**Transaction ID : cc16dc78-e034-4eee-b**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 60.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377410

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Cynthia Stewart

Mailing Address 3001 Pendell Lane

City Ft. Smith State AR Zip Code 72901

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
50.00

**Transaction ID : af34f1dc-aef9-45d7-9**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Cynthia Stewart

Mailing Address 3001 Pendell Lane

City Ft. Smith State AR Zip Code 72901

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
8.10

**Transaction ID : d1d3213b-8517-41c0-b**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 58.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377411

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Warren Gravois

Mailing Address 16005 7th St

City: Pearlington State: MS Zip Code: 39572

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 48.00

**Transaction ID : 0d8bda3d-6c0e-4fe2-8**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Warren Gravois

Mailing Address 16005 7th St

City: Pearlington State: MS Zip Code: 39572

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 1.95

**Transaction ID : e532b018-3ca2-49bf-9**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 49.95

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377412

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Elizabeth Hanks

Mailing Address 891 W. Melmar

City: Fayetteville State: AR Zip Code: 72703

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 35.00

**Transaction ID : b2854ed6-2917-4011-9**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Elizabeth Hanks

Mailing Address 891 W. Melmar

City: Fayetteville State: AR Zip Code: 72703

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 11.70

**Transaction ID : 3318d92b-9cc6-4b1e-a**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 46.70

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377413

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 35.00

**Transaction ID : c0e9aaad-65c8-4d4e-b**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 8.10

**Transaction ID : cbad91fe-a6fd-4b3c-9**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 43.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377414

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Peter Sahuc

Mailing Address 107 Phillip Ave

City Lafayette | State LA | Zip Code 70503

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
60.00

**Transaction ID : 4fd2a9d0-d9c1-4e5d-b**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Peter Sahuc

Mailing Address 107 Phillip Ave

City Lafayette | State LA | Zip Code 70503

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
4.83

**Transaction ID : 7c715fdc-bf4f-4176-9**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 64.83

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377415

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Tatro

Mailing Address 1208 Braeburn Rd

City: Charlotte State: NC Zip Code: 28211

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 40.00

**Transaction ID : 530c1ee3-7330-41b8-b**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James Tatro

Mailing Address 1208 Braeburn Rd

City: Charlotte State: NC Zip Code: 28211

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 3.60

**Transaction ID : 6c9fb12a-1607-49c2-8**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 43.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377416

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City: Sterling State: VA Zip Code: 20165

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 10.00

**Transaction ID : f7579510-f2cc-49f0-8**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 50.00

**Transaction ID : a154cf46-e664-4643-a**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 60.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377417

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 4.20

**Transaction ID : e8d8958f-0c1a-42c6-b**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eric J Smith

Mailing Address 4967 Dysartville

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 80.00

**Transaction ID : e505cee0-268b-4278-9**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 84.20

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377418

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 80.00

**Transaction ID : 9b2c73e5-8912-4292-9**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 7.50

**Transaction ID : 94d50e13-3545-46d1-a**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 87.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377419

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
60.00

**Transaction ID : 93101208-4a80-44c4-8**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
17.10

**Transaction ID : ee71b4a6-8e71-495a-a**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 77.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377420

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
30.00

**Transaction ID : 0ed06a4b-f033-402d-8**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 554635.78

Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
13.50

**Transaction ID : f86067d9-c33a-45b3-b**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 554635.78

Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 43.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377421

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 27.50

**Transaction ID : f5264189-45ff-4cdf-8**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 13.80

**Transaction ID : a1826e70-73ea-473c-8**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 41.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377422

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 35.00

**Transaction ID : 8928e37e-e487-4d09-a**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 1.83

**Transaction ID : deed10c0-1817-4c93-9**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 36.83

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377423

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 87.50

**Transaction ID : 239c413b-19b0-4b67-8**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 25.80

**Transaction ID : ab10e9be-f84c-441d-9**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 113.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377424

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 45.00

**Transaction ID : 7194f6a2-41c1-41fd-a**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 9.60

**Transaction ID : 8d3c033e-86de-441a-a**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 54.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377425

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Wayne Burckel

Mailing Address 46 Glenwood Ave

City Harahan | State LA | Zip Code 70123

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
20.00

**Transaction ID : 0deeeaf0-40b5-47b6-b**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Wayne Burckel

Mailing Address 46 Glenwood Ave

City Harahan | State LA | Zip Code 70123

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
0.30

**Transaction ID : e0375cca-c0a7-4bee-9**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 20.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City: Kenner State: LA Zip Code: 70065

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 40.00

**Transaction ID : fcb250ab-c7e1-4f75-b**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City: Kenner State: LA Zip Code: 70065

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 9.06

**Transaction ID : 51c8a717-7d5c-4ec9-b**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 49.06

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377427

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Reagan Brackett

Mailing Address 502 E Center Ave

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
90.00

**Transaction ID : 2acefe6b-c7a1-414f-9**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Reagan Brackett

Mailing Address 502 E Center Ave

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
43.29

**Transaction ID : 83c1b1a0-4286-4910-9**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 133.29

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377428

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amelia Brackett

Mailing Address 804 Roundabout Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
90.00

**Transaction ID : a11a90b0-afa0-4552-8**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Amelia Brackett

Mailing Address 804 Roundabout Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
44.52

**Transaction ID : c4fc451b-fd13-47b6-b**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 134.52

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Andrea L Hammond

Mailing Address 12920 Kneeland Ln

City Neosho State MO Zip Code 64850

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
100.00

**Transaction ID : 962101ce-723f-42ed-9**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Andrea L Hammond

Mailing Address 12920 Kneeland Ln

City Neosho State MO Zip Code 64850

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
45.00

**Transaction ID : 43a787dc-6766-41ca-a**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 145.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
90.00

**Transaction ID : 61b2cf1f-c3e2-43b4-a**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
0.60

**Transaction ID : df8bdaca-f196-457e-8**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 90.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Sherri Zerbel

Mailing Address 804 Mary Ave

City: Neasho State: MO Zip Code: 64850

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 37.50

**Transaction ID : 0bd6cb1f-c4f2-44b1-b**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Sherri Zerbel

Mailing Address 804 Mary Ave

City: Neasho State: MO Zip Code: 64850

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 17.40

**Transaction ID : 98d6fe54-9b52-4c36-8**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 54.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377432

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Courtney Goldstein

Mailing Address 1809 N Woodlawn

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 32.50

**Transaction ID : 1e4b7f3a-0e15-4942-a**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Courtney Goldstein

Mailing Address 1809 N Woodlawn

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 6.00

**Transaction ID : a4ec2d6d-8d3e-47fd-9**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 38.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377433

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jon Linch

Mailing Address 6108 Harkins Ave

City: Little Rock State: AR Zip Code: 72210

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 120.00

**Transaction ID : eb7398d0-5f21-4aa7-8**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jon Linch

Mailing Address 6108 Harkins Ave

City: Little Rock State: AR Zip Code: 72210

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 37.80

**Transaction ID : 381e080c-eacc-480a-b**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 157.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377434

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Charity Zerbel

Mailing Address 804 Mary Ave

City Neosho | State MO | Zip Code 64850

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
37.50

**Transaction ID : ce4fe043-03c9-4e24-a**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Charity Zerbel

Mailing Address 804 Mary Ave

City Neosho | State MO | Zip Code 64850

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
17.40

**Transaction ID : 2e612cb9-8c06-4c7f-a**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 54.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377435

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 40.00

**Transaction ID : 05c0409c-1391-4771-a**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 3.60

**Transaction ID : f2c48a6e-6f79-40fe-b**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 43.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377436

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 80.00

**Transaction ID : 07948318-6019-4935-a**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 11.10

**Transaction ID : db68fb7c-4903-4172-9**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 91.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377437

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
100.00

**Transaction ID : 10d546e7-3455-4ac6-9**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
21.30

**Transaction ID : 13942ff7-2064-4220-9**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 121.30

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377438

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Beverly Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
100.00

**Transaction ID : ea9c96b5-5f62-47db-8**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Sarinda S Dudley

Mailing Address 4367 Splitlog Rd

City Goodman State MO Zip Code 64843

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 02 / 2014

Amount
50.00

**Transaction ID : a3acb6d8-9901-4939-9**

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 150.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Sarinda S Dudley

Mailing Address 4367 Splitlog Rd

City: Goodman State: MO Zip Code: 64843

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 28.50

**Transaction ID : d2466f94-4e8e-4bee-9**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Alexa S Dudley

Mailing Address 4367 Splitlog Rd

City: Goodman State: MO Zip Code: 64843

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 50.00

**Transaction ID : 0fb2765c-22d3-4647-a**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 78.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 60.00

**Transaction ID : 8ed7eae7-ccdd-441e-b**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 60.00

**Transaction ID : 49d4f729-1d35-467e-a**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 120.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377441

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 60.00

**Transaction ID : 8db3bae2-c993-4d19-8**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Rodney D Culbreth

Mailing Address 100 Asbury CT
3200 Dam Neck Rd

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 60.00

**Transaction ID : 7391940d-09ae-418f-a**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 120.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377442

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rze Culbreath

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 60.00

**Transaction ID : 1c2e2720-97d3-41b4-b**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 40.00

**Transaction ID : a8c50f16-7fbd-4661-b**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 100.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377443

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lee R Carter

Date of Public Distribution/Dissemination
08 / 02 / 2014

Mailing Address 3110 Brentwood Rd

Amount
7.20

City Raleigh | State NC | Zip Code 27604

**Transaction ID : 824cfbf8-679b-402e-8**

Purpose of Expenditure
Mileage

Category/Type 002

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nathan Smith
Originally reported against Kay Hagan, corrected with filing

Date of Public Distribution/Dissemination
08 / 02 / 2014

Mailing Address 1247 W Mt Comfort Rd

Amount
30.00

City Fayatteville | State AR | Zip Code 72703

**Transaction ID : 5eb68b14-338b-4d5a-a**

Purpose of Expenditure
Salary

Category/Type 001

Date of Disbursement or Obligation
08 / 02 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 37.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377444

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nathan Smith
Originally reported against Kay Hagan, corrected with filing

Mailing Address 1247 W Mt Comfort Rd

City: Fayatteville State: AR Zip Code: 72703

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 7.71

**Transaction ID : ff431061-8683-4f84-9**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 60.00

**Transaction ID : 313aa5c4-ef80-41da-b**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 67.71

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 12.00

**Transaction ID : 0e94a529-73a2-4220-9**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 90.00

**Transaction ID : 3a81aa07-6f65-4149-b**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 102.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377446

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 02 / 2014

Amount: 28.80

**Transaction ID : a728ac53-858f-412e-9**

Date of Disbursement or Obligation: 08 / 02 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 15.00

**Transaction ID : 79777f52-d3c3-4fc2-8**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 43.80

**(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 7.80

**Transaction ID : 3115526f-7f19-4f9a-a**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 50.00

**Transaction ID : 019d7e1f-fce2-458c-b**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 57.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377448

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 6.00

**Transaction ID : dd1af5c7-7828-4e26-8**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Corey Miller

Mailing Address 8617 Riley Hills Rd

City: Zebulon State: NC Zip Code: 27597

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 40.00

**Transaction ID : ef1e5ac8-2f4d-489d-a**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 46.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Corey Miller

Mailing Address 8617 Riley Hills Rd

City: Zebulon State: NC Zip Code: 27597

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 9.00

**Transaction ID : 5111e9b1-947d-48c7-a**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jonathan Odette

Mailing Address 9600 Earpsboro Chamblee Road

City: Wendell State: NC Zip Code: 27591

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 40.00

**Transaction ID : 6b4a94ed-efc3-4ce7-8**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 49.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377450

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jonathan Odette

Mailing Address 9600 Earpsboro Chamblee Road

City: Wendell State: NC Zip Code: 27591

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 16.20

**Transaction ID : adf28d2a-5ee1-43ee-a**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City: Shreveport State: LA Zip Code: 71104

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 20.00

**Transaction ID : 08f0f951-b265-4513-a**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 36.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377451

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 03 / 2014

Amount
14.10

**Transaction ID : 58c4b477-7f9d-46cf-8**

Date of Disbursement or Obligation
08 / 03 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 03 / 2014

Amount
30.00

**Transaction ID : 8fc95050-d7e4-4072-a**

Date of Disbursement or Obligation
08 / 03 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 44.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377452

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport | State LA | Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 03 / 2014

Amount
16.20

**Transaction ID : 796953d1-f751-47c8-9**

Date of Disbursement or Obligation
08 / 03 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tachnany Evans

Mailing Address 3726 Saint Joe Road

City Atkins | State AR | Zip Code 72823

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 03 / 2014

Amount
30.00

**Transaction ID : 49adc15d-0be7-4e83-b**

Date of Disbursement or Obligation
08 / 03 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 46.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377453

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tachnany Evans

Mailing Address 3726 Saint Joe Road

City: Atkins State: AR Zip Code: 72823

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 19.80

**Transaction ID : 39f136f3-290d-4398-a**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brooke Graphia

Mailing Address 2306 Brownlee Rd.

City: Bossier City State: LA Zip Code: 71111

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 15.00

**Transaction ID : efef3149-9560-4694-a**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 34.80

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377454

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brooke Graphia

Mailing Address 2306 Brownlee Rd.

City: Bossier City State: LA Zip Code: 71111

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 2.01

**Transaction ID : 48852e86-86c6-4a37-8**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 90.00

**Transaction ID : 0b9f432c-2fdd-472e-8**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 92.01

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377455

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 13.50

**Transaction ID : 2f15c9e7-a9ae-4ded-a**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tabetha D Espenschied

Mailing Address 2002 East Park Ave
Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 50.00

**Transaction ID : 6fb5b1b6-08a9-49c3-9**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 63.50

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377456

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Taylor N Randall

Mailing Address
2002 E Park Ave
Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 50.00

**Transaction ID : f06502f6-cf71-4cc6-a**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Taylor N Randall

Mailing Address
2002 E Park Ave
Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 25.38

**Transaction ID : 4aef3764-52e5-46f9-a**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 75.38

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377457

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 20.00

**Transaction ID : ba95e54f-171f-44c9-b**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 3.54

**Transaction ID : e54df5dd-adc0-4f2f-a**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 23.54

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377458

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City Ville Platte | State LA | Zip Code 70586

Purpose of Expenditure Salary | Category/Type 001

Date of Public Distribution/Dissemination 08 / 03 / 2014

Amount 60.00

**Transaction ID : 9ba245e3-b374-41fc-8**

Date of Disbursement or Obligation 08 / 03 / 2014

Name of Federal Candidate Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City Ville Platte | State LA | Zip Code 70586

Purpose of Expenditure Mileage | Category/Type 002

Date of Public Distribution/Dissemination 08 / 03 / 2014

Amount 32.40

**Transaction ID : ae27ae18-0323-4883-9**

Date of Disbursement or Obligation 08 / 03 / 2014

Name of Federal Candidate Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 92.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377459

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 80.00

**Transaction ID : 82685644-e79a-4ff4-9**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 28.80

**Transaction ID : 0001e039-64ee-4ac6-9**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 108.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377460

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Tatro

Date of Public Distribution/Dissemination
08 / 03 / 2014

Mailing Address 1208 Braeburn Rd

Amount
65.00

City: Charlotte State: NC Zip Code: 28211

**Transaction ID : a93c8a56-1322-40ab-8**

Purpose of Expenditure
Salary

Category/Type 001

Date of Disbursement or Obligation
08 / 03 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James Tatro

Date of Public Distribution/Dissemination
08 / 03 / 2014

Mailing Address 1208 Braeburn Rd

Amount
4.50

City: Charlotte State: NC Zip Code: 28211

**Transaction ID : e8ac6320-b30c-4e6d-b**

Purpose of Expenditure
Mileage

Category/Type 002

Date of Disbursement or Obligation
08 / 03 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 69.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377461

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 105.00

**Transaction ID : ec8af914-15df-4fce-9**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 24.60

**Transaction ID : 4f7e4326-b826-479c-a**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 129.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 80.00

**Transaction ID : bc4fe657-a8be-4486-8**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 24.30

**Transaction ID : 29a7ab53-e47e-421b-b**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 104.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377463

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 03 / 2014

Amount
75.00

**Transaction ID : e4d5563e-43eb-41e7-a**

Date of Disbursement or Obligation
08 / 03 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 03 / 2014

Amount
18.30

**Transaction ID : 9c86618e-6f08-43c0-a**

Date of Disbursement or Obligation
08 / 03 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 93.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377464

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 35.00

**Transaction ID : da003511-bab2-4850-b**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 2.61

**Transaction ID : 32455841-f0f8-4bc0-9**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 37.61

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brandon Guttuso

Mailing Address 3013 Transcontinental Dr

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 70.00

**Transaction ID : 60355185-5296-45be-a**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brandon Guttuso

Mailing Address 3013 Transcontinental Dr

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 6.00

**Transaction ID : 3e8e219c-a60b-408e-a**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 76.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377466

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Evelyn Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 70.00

**Transaction ID : 7598902c-156e-43a7-b**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Evelyn Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 6.00

**Transaction ID : b8ea86a5-f0bf-42c7-a**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 76.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377467

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tarrin Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 70.00

**Transaction ID : 3e526af5-31f7-4260-9**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tarrin Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 6.00

**Transaction ID : a83cf961-cdc6-4b77-a**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 76.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377468

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nathan Smith

Mailing Address 1247 W Mt Comfort Rd

City: Fayatteville State: AR Zip Code: 72703

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 50.17

**Transaction ID : 15d4e6c8-8cc1-49d1-b**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nathan Smith

Mailing Address 1247 W Mt Comfort Rd

City: Fayatteville State: AR Zip Code: 72703

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 14.52

**Transaction ID : f9eda637-8c39-4a3e-8**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 64.69

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377469

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Elizabeth Allison

Mailing Address 157 Bishop Drive

City: Avondale State: LA Zip Code: 70094

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 13.20

**Transaction ID : c1de6355-bf03-4feb-b**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Laura Rose Porter

Mailing Address 227 Fairgrounds Road

City: Natchitoches State: LA Zip Code: 71457

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 13.20

**Transaction ID : 3754a2db-9d30-4c82-8**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 26.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377470

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Laura Rose Porter

Mailing Address 227 Fairgrounds Road

City Natchitoches State LA Zip Code 71457

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 03 / 2014

Amount
2.40

**Transaction ID : 49cdf79e-0c5a-4aa9-9**

Date of Disbursement or Obligation
08 / 03 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 03 / 2014

Amount
80.00

**Transaction ID : e7b54da4-55a9-4717-9**

Date of Disbursement or Obligation
08 / 03 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 82.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 03 / 2014

Amount
1.20

**Transaction ID : f1e34313-1050-4dea-9**

Date of Disbursement or Obligation
08 / 03 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Najib Mahmud

Mailing Address 3432 Riverrock Ct

City Baton Rouge State LA Zip Code 70820

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 03 / 2014

Amount
60.00

**Transaction ID : 448a8e7b-774e-4f02-b**

Date of Disbursement or Obligation
08 / 03 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 61.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377472

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Najib Mahmud

Mailing Address 3432 Riverrock Ct

City: Baton Rouge State: LA Zip Code: 70820

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 03 / 2014

Amount: 4.80

**Transaction ID : d607e4e9-0a10-4c41-9**

Date of Disbursement or Obligation: 08 / 03 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shelby J Davis

Mailing Address 6414 The Divide Pkwy
Apt 204

City: Little Rock State: AR Zip Code: 72223

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 20.00

**Transaction ID : d6ca9f03-c8d5-4b80-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 24.80

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shelby J Davis

Mailing Address
6414 The Divide Pkwy
Apt 204

City: Little Rock
State: AR
Zip Code: 72223

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 7.80

**Transaction ID : 37d363fb-c42f-4b69-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Gabriella E Hansen

Mailing Address
310 West Meath Drive

City: Winterville
State: NC
Zip Code: 28590

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 10.00

**Transaction ID : 532e9dcb-ae58-45a1-8**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 17.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377474

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Buchanan

Mailing Address 1090 McHone Rd

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 40.00

**Transaction ID : b6bc6cbc-fca8-4ecb-b**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Chassidy Menard

Mailing Address 515 Walter Dr.

City: Lafayette State: LA Zip Code: 70507

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 30.00

**Transaction ID : f593ba8a-9ba9-41a0-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 70.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377475

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Chassidy Menard

Mailing Address 515 Walter Dr.

City: Lafayette State: LA Zip Code: 70507

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 6.00

Transaction ID : 7b9c4e25-cf0b-4c13-a

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jenna M Ledford

Mailing Address 2279 Gouges Creek Rd

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 30.00

Transaction ID : 21c99a6e-a84f-49a4-8

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 36.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jenna M Ledford

Mailing Address 2279 Gouges Creek Rd

City: Spruce Pine | State: NC | Zip Code: 28777

Purpose of Expenditure: Mileage | Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 30.00

**Transaction ID : b64277cf-3fd8-4dd5-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mr. Haley Brown

Mailing Address 344 Natalie Drive

City: Winston-Salem | State: NC | Zip Code: 27030

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 20.00

**Transaction ID : 55045bf5-7a2e-43f4-8**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 50.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377477

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Haley Brown

Mailing Address 344 Natalie Drive

City Winston-Salem State NC Zip Code 27030

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
3.60

**Transaction ID : 4baacce6-fd5c-460d-a**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Emily Butler

Mailing Address 1676 Shady Creek Rd

City Ayden State NC Zip Code 28513

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
28.30

**Transaction ID : 8f46a425-9dc5-4853-b**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 31.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377478

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Emily Butler

Mailing Address 1676 Shady Creek Rd

City: Ayden State: NC Zip Code: 28513

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 7.62

**Transaction ID : 6251a938-cad2-4bfe-8**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 70.00

**Transaction ID : fe23358e-b56c-40b6-8**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 77.62

(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 28.20

**Transaction ID : 0f92c128-882b-4773-8**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 70.00

**Transaction ID : 5fdeb2ae-70f3-4cf7-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 98.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377480

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 27.90

**Transaction ID : 513e0fd3-4dac-4f75-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶
2014

Full Name of Payee
Steven Jean

Mailing Address 2012 Harrison Ave

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 60.00

**Transaction ID : 63bdff6b-6187-4c5d-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶
2014

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 87.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Jean

Mailing Address 2012 Harrison Ave

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 10.50

**Transaction ID : 324e5d7a-d8b5-4893-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Andrea Melton

Mailing Address 4015 Village Place

City: Winston-Salem State: NC Zip Code: 27127

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 20.00

**Transaction ID : 0a9a96a5-0c31-42aa-8**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 30.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377482

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Xavier Miller

Mailing Address 407 randall Dr

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 25.00

**Transaction ID : b279fbeb-7b20-42c2-b**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Felice Barrett

Mailing Address 1588 Asbury

City: Springdale State: AR Zip Code: 72762

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 35.00

**Transaction ID : 04564336-5871-4580-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 60.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377483

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Felice Barrett

Mailing Address 1588 Asbury

City: Springdale State: AR Zip Code: 72762

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 7.23

**Transaction ID : 8d09f03a-d30f-406d-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Laura U Logie

Mailing Address 2565 Shire Circle

City: Harrisonburg State: VA Zip Code: 22801

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 15.00

**Transaction ID : d112d389-2eba-4efb-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 22.23

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377484

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Casey Stockton

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 40.00

**Transaction ID : 32eb54c0-b9e2-4e16-b**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Casey Stockton

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 20.10

**Transaction ID : a6421357-9c25-4959-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 60.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377485

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Barbara E Spritz

Mailing Address 3346 Durham St Ext

City: Burlington State: NC Zip Code: 27217

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 65.00

**Transaction ID : 084ac998-5eb4-4c67-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Barbara E Spritz

Mailing Address 3346 Durham St Ext

City: Burlington State: NC Zip Code: 27217

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 3.30

**Transaction ID : 38f47755-a7fb-4e09-b**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 68.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377486

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Antoinette Franklin

Mailing Address 8822 Apple St

City: New Orleans State: LA Zip Code: 70188

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 55.00

**Transaction ID : e7fa916e-6111-40f9-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Antoinette Franklin

Mailing Address 8822 Apple St

City: New Orleans State: LA Zip Code: 70188

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 55.00

**Transaction ID : 70e8d501-6cab-4356-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 110.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377487

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Morgan R Padgett

Mailing Address 2164 Kay Rd

City Greenville State NC Zip Code 27858

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
10.00

**Transaction ID : 36bf7ea1-f49c-430c-b**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Morgan R Padgett

Mailing Address 2164 Kay Rd

City Greenville State NC Zip Code 27858

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
3.60

**Transaction ID : 19e5651c-0522-4067-8**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 13.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377488

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 20.00

**Transaction ID : 6be8aafa-65bd-4bfa-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 0.60

**Transaction ID : b777026f-6432-4820-b**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 20.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Barbra L Landry

Mailing Address 2992 Wright Ave

City: Fayetteville State: AR Zip Code: 72704

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 40.00

**Transaction ID : c8873e08-14f6-4e82-b**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Barbra L Landry

Mailing Address 2992 Wright Ave

City: Fayetteville State: AR Zip Code: 72704

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 3.90

**Transaction ID : 11f54b07-e3e1-4565-8**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 43.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377490

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeremy Hollar

Mailing Address 121 Meadowview Drive

City Boone State NC Zip Code 28607

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
80.00

**Transaction ID : bad5d9a0-5b38-4e77-b**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeremy Hollar

Mailing Address 121 Meadowview Drive

City Boone State NC Zip Code 28607

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
24.90

**Transaction ID : 8bc6ece1-f880-46a3-a**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 104.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377491

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francesca Blom

Mailing Address 101 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 80.00

**Transaction ID : d3d5de8c-8f26-42d8-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Elizabeth Hanks

Mailing Address 891 W. Melmar

City: Fayetteville State: AR Zip Code: 72703

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 60.00

**Transaction ID : 4368d088-7bf4-4d78-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 140.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377492

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Elizabeth Hanks

Mailing Address 891 W. Melmar

City: Fayetteville State: AR Zip Code: 72703

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 10.50

**Transaction ID : dc143cde-6203-4513-b**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Barbara A Williams

Mailing Address 3002 Darden Rd
Apt A

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 100.00

**Transaction ID : 5e11af60-14b8-4a90-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 110.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377493

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Roger McKinney

Mailing Address 308 West Main Street

City: Pilot Mountian State: NC Zip Code: 27041

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 67.50

**Transaction ID : 768840bb-34f3-4439-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mr. Roger McKinney

Mailing Address 308 West Main Street

City: Pilot Mountian State: NC Zip Code: 27041

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 13.56

**Transaction ID : 1e126e69-2f0c-4b4d-8**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 81.06

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377494

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City Raleigh | State NC | Zip Code 27610

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
13.00

**Transaction ID : b17e769a-8bdb-4b39-8**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City Raleigh | State NC | Zip Code 27610

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
7.20

**Transaction ID : 521f242b-0e4b-44a2-9**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 20.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377495

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Glenda McKinney

Mailing Address 308 West Main Street

City: Plot Mountain State: NC Zip Code: 27041

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 67.50

**Transaction ID : 0e8feaa8-d175-4813-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City: Shelby State: NC Zip Code: 28152

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 33.00

**Transaction ID : 41325526-6b4e-41b1-8**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 100.50

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377496

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City Shelby | State NC | Zip Code 28152

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
20.55

**Transaction ID : 8ab11184-ca61-4758-a**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Allie Butler

Mailing Address 1676 Shady Creek Rd

City Ayden | State NC | Zip Code 28513

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
30.00

**Transaction ID : 8ac75131-720a-4f23-b**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 50.55

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377497

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Allie Butler

Mailing Address 1676 Shady Creek Rd

City: Ayden State: NC Zip Code: 28513

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 7.62

**Transaction ID : ff85d64a-6913-43ac-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 50.00

**Transaction ID : 4504e97c-625a-4431-8**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 57.62

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377498

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 12.30

**Transaction ID : 7bb36d10-28ae-4273-b**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ky Broussard

Mailing Address 301 N Cedar Street

City: Abbeville State: LA Zip Code: 70510

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 35.00

**Transaction ID : 84d9d663-1f45-4547-8**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 47.30

(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377499

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ky Broussard

Mailing Address 301 N Cedar Street

City Abbeville | State LA | Zip Code 70510

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
13.50

**Transaction ID : daa633a6-de88-419c-a**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James Tatro

Mailing Address 1208 Braeburn Rd

City Charlotte | State NC | Zip Code 28211

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
40.00

**Transaction ID : 3755e9fb-1c4e-4321-b**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 53.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377500

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Tatro

Date of Public Distribution/Dissemination
08 / 04 / 2014

Mailing Address 1208 Braeburn Rd

Amount
4.20

City: Charlotte State: NC Zip Code: 28211

**Transaction ID : 91f8ade5-4265-4b8e-9**

Purpose of Expenditure
Mileage

Category/Type 002

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Peter Sahuc

Date of Public Distribution/Dissemination
08 / 04 / 2014

Mailing Address 107 Phillip Ave

Amount
40.00

City: Lafayette State: LA Zip Code: 70503

**Transaction ID : 885dd67d-9a0d-4a40-9**

Purpose of Expenditure
Salary

Category/Type 001

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 44.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377501

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Peter Sahuc

Mailing Address 107 Phillip Ave

City Lafayette State LA Zip Code 70503

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
4.86

**Transaction ID : 5252f0fd-2e26-493b-b**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City Raleigh State NC Zip Code 27604

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
45.00

**Transaction ID : 49810c51-55a6-4cf7-8**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 49.86

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377502

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 12.00

**Transaction ID : 5d2ca77e-f092-4e27-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nathan D Wirebaugh

Mailing Address 7320 Red Maple Dr

City: Holland State: OH Zip Code: 43528

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 50.00

**Transaction ID : 15261231-ec11-42cf-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 62.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377503

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 35.00

**Transaction ID : 72c180b9-fc75-42d9-8**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 29.40

**Transaction ID : bc2ebf84-b5f3-4040-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 64.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377504

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brooke Graphia

Mailing Address 2306 Brownlee Rd.

City: Bossier City | State: LA | Zip Code: 71111

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 10.00

**Transaction ID : d87d4e44-d886-49a2-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brooke Graphia

Mailing Address 2306 Brownlee Rd.

City: Bossier City | State: LA | Zip Code: 71111

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 1.29

**Transaction ID : 8321a8eb-5e33-40c4-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 11.29

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377505

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gloria A Krieger

Mailing Address 1392 Lee Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 15.00

**Transaction ID : 5379a5bb-3101-45f8-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Gloria A Krieger

Mailing Address 1392 Lee Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 0.45

**Transaction ID : 9ba90dcc-7846-4837-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 15.45

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377506

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Theresa A Touchet

Mailing Address 102 French Street #3

City: New Orleans State: LA Zip Code: 70124

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 14.00

**Transaction ID : 866ac97f-b61d-40c5-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Theresa A Touchet

Mailing Address 102 French Street #3

City: New Orleans State: LA Zip Code: 70124

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 0.30

**Transaction ID : 1289cf0d-25eb-4447-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 14.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377507

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Trent C Oelschlaeger

Mailing Address 18710 Strawberry Plant Road

City: Fayetteville State: AR Zip Code: 72704

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 17.00

**Transaction ID : dc295e3b-29f6-4ea5-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Trent C Oelschlaeger

Mailing Address 18710 Strawberry Plant Road

City: Fayetteville State: AR Zip Code: 72704

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 13.80

**Transaction ID : d2c29b13-0e1d-4c2e-8**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 30.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377508

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 60.00

**Transaction ID : 6b232dd0-71cb-42bb-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 35.40

**Transaction ID : c80e4c4c-0aa3-4868-8**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 95.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377509

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 50.00

**Transaction ID : 83c394e1-87ab-4c1b-b**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 30.90

**Transaction ID : ded98999-4675-4d89-8**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 80.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377510

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rebecca A Calvert

Mailing Address 20116 Medus St

City: Covington State: LA Zip Code: 70435

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 15.00

**Transaction ID : 0e6ca0fb-0bfb-41cc-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Rebecca A Calvert

Mailing Address 20116 Medus St

City: Covington State: LA Zip Code: 70435

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 3.54

**Transaction ID : 3004c6d0-ed56-4a54-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 18.54

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377511

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City Search | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
40.00

**Transaction ID : 1896f6d7-e69f-4b6d-b**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City Search | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
3.00

**Transaction ID : 6f884f56-809e-452e-9**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 43.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377512

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
80.00

**Transaction ID : 0d87073c-6d33-4e59-b**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
20.10

**Transaction ID : 06229a4a-6b86-45e8-9**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 100.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377513

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shelby J Davis

Mailing Address
6414 The Divide Pkwy
Apt 204

City: Little Rock
State: AR
Zip Code: 72223

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 50.00

**Transaction ID : c9f414a9-fe15-48d7-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shelby J Davis

Mailing Address
6414 The Divide Pkwy
Apt 204

City: Little Rock
State: AR
Zip Code: 72223

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 11.10

**Transaction ID : a33036d2-2b54-4d4c-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 61.10

(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.

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951377514

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amanda Boley

Mailing Address Split Oak Drive

City charlotte State NC Zip Code 28227

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
45.00

**Transaction ID : 6b1274bf-634f-4dca-8**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Amanda Boley

Mailing Address Split Oak Drive

City charlotte State NC Zip Code 28227

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
15.42

**Transaction ID : d9166ae9-2241-4f1f-b**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 60.42

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377515

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tabetha D Espenschied

Mailing Address
2002 East Park Ave
Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 60.00

**Transaction ID : 038df358-e9c0-4625-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Taylor N Randall

Mailing Address
2002 E Park Ave
Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 60.00

**Transaction ID : 2a3a9ca8-f01f-4671-b**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 120.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377516

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Taylor N Randall

Mailing Address
2002 E Park Ave
Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 23.46

**Transaction ID : 0ecbaaa7-c53c-4e8c-8**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carmen Maddrey

Mailing Address
2043 Nottingham Ln

City: Burlington State: NC Zip Code: 27215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 80.00

**Transaction ID : 4ddc33a2-97ac-41bf-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 103.46

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carmen Maddrey

Mailing Address 2043 Nottingham Ln

City: Burlington State: NC Zip Code: 27215

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 3.90

**Transaction ID : 65d1ed7b-c073-492e-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 30.00

**Transaction ID : e23c7745-33ad-4f2c-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 33.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377518

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 8.40

**Transaction ID : 546bcc5c-0a5b-4bba-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City: Shreveport State: LA Zip Code: 71104

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 30.00

**Transaction ID : b15bf84e-a989-44a1-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 38.40

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377519

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
13.50

**Transaction ID : b74cddc6-4b3d-471c-a**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Christopher Pollreis

Mailing Address 15.5 Magnolia Circle

City Searcy State AR Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
25.00

**Transaction ID : 962012b7-bddf-4013-8**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 38.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377520

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Pollreis

Mailing Address 15.5 Magnolia Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure Mileage | Category/Type 002

Date of Public Distribution/Dissemination 08 / 04 / 2014

Amount 6.90

**Transaction ID : 771f312b-6616-48f0-8**

Date of Disbursement or Obligation 08 / 04 / 2014

Name of Federal Candidate Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eric J Smith

Mailing Address 4967 Dysartville

City Morganton | State NC | Zip Code 28655

Purpose of Expenditure Salary | Category/Type 001

Date of Public Distribution/Dissemination 08 / 04 / 2014

Amount 80.00

**Transaction ID : 7572d07f-4dd4-4946-b**

Date of Disbursement or Obligation 08 / 04 / 2014

Name of Federal Candidate Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 86.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377521

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City Morganton State NC Zip Code 28655

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
80.00

**Transaction ID : 5321ebd3-268f-4210-9**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City Morganton State NC Zip Code 28655

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
9.00

**Transaction ID : 79a2058c-0de0-44c5-a**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377522

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 95.00

**Transaction ID : 6671176f-3380-4e26-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 8.70

**Transaction ID : 3ff259e0-6576-4349-8**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 103.70

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377523

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Bonnie C Blackburn

Mailing Address 2261 King George Ct.

City: Winston-Salem State: NC Zip Code: 27103

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 20.00

**Transaction ID : f13bdb87-6849-4e8a-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Bonnie C Blackburn

Mailing Address 2261 King George Ct.

City: Winston-Salem State: NC Zip Code: 27103

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 8.10

**Transaction ID : a1234564-87d0-4c03-b**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 28.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377524

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 85.00

**Transaction ID : c6f89535-af71-48ec-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 26.70

**Transaction ID : 4a8a98d1-5821-4560-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 111.70

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377525

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 85.00

**Transaction ID : 8be13003-a066-4733-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 23.40

**Transaction ID : 46506c4b-6ba4-4053-b**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 108.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377526

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Reagan Brackett

Mailing Address 502 E Center Ave

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
50.00

**Transaction ID : 549a8de8-7499-44dd-8**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro | State NC | Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
45.00

**Transaction ID : d1b71493-bc62-4aff-b**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 95.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 17.10

**Transaction ID : 221e41bd-3b36-47f6-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Najib Mahmud

Mailing Address 3432 Riverrock Ct

City: Baton Rouge State: LA Zip Code: 70820

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 50.00

**Transaction ID : 59193a65-af1a-4fd6-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 67.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377528

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Najib Mahmud

Mailing Address 3432 Riverrock Ct

City: Baton Rouge State: LA Zip Code: 70820

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 4.20

**Transaction ID : 5e70a7e4-5f33-4db7-8**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Sherri Zerbel

Mailing Address 804 Mary Ave

City: Neasho State: MO Zip Code: 64850

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 25.00

**Transaction ID : f43e2e0c-e4ed-4d36-b**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 29.20

**(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377529

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Sherri Zerbel

Mailing Address 804 Mary Ave

City Neasho State MO Zip Code 64850

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
16.20

**Transaction ID : 98b5e724-e943-4fb1-9**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
75.00

**Transaction ID : 42a2d793-7f3f-416f-8**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 91.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377530

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 21.30

**Transaction ID : 357629db-e1ef-41fc-b**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Beverly Williams

Mailing Address 3007 Darden Rd

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 75.00

**Transaction ID : ae6f8259-f165-4323-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 96.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377531

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on MM / DD / YYYY

Full Name of Payee
Kassidy L Tyer

Mailing Address 41 Hawk Hollow Trail

City: Burgaw State: NC Zip Code: 28425

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 25.00

**Transaction ID : 0a5ede9e-2e0a-4d16-8**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kassidy L Tyer

Mailing Address 41 Hawk Hollow Trail

City: Burgaw State: NC Zip Code: 28425

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 19.77

**Transaction ID : 52b1881d-673d-48a7-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 44.77

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377532

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 100.00

**Transaction ID : e770702e-f52b-407b-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 14.40

**Transaction ID : 9ae6d7ec-8ef7-4291-8**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 114.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377533

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amelia Brackett

Mailing Address 804 Roundabout Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
50.00

**Transaction ID : 0e858c21-5b59-41b3-b**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Amelia Brackett

Mailing Address 804 Roundabout Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
44.34

**Transaction ID : 2ccfe43a-447b-409d-b**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 94.34

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377534

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City: Sterling State: VA Zip Code: 20165

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 80.00

**Transaction ID : f740797d-d530-4038-8**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 60.00

**Transaction ID : 437fa94d-fae3-48a6-b**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 140.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 60.00

**Transaction ID : aebfa902-8f87-4b27-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rodney D Culbreth

Mailing Address 100 Asbury CT
3200 Dam Neck Rd

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 60.00

**Transaction ID : 6a5d7f30-b344-4416-b**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 120.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377536

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rze Culbreath

Mailing Address 100 Asbury Ct

City Winchester | State VA | Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
60.00

**Transaction ID : ce1702b7-4b40-4452-8**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City Winchester | State VA | Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
50.00

**Transaction ID : c537a112-aaef-4f6d-8**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 110.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377537

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
65.00

**Transaction ID : 24edb132-4376-4b02-b**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
0.90

**Transaction ID : 967bb686-50cb-494e-a**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 65.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377538

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
100.00

**Transaction ID : 47f4bee7-09e2-4b5c-8**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 04 / 2014

Amount
20.10

**Transaction ID : 5476040b-97e1-4763-8**

Date of Disbursement or Obligation
08 / 04 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 120.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377539

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Caleb Craig

Mailing Address 1410 Bushville drive

City: Lenoir State: NC Zip Code: 28645

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 100.00

**Transaction ID : b78cfbd5-4d89-49d8-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Caleb Craig

Mailing Address 1410 Bushville drive

City: Lenoir State: NC Zip Code: 28645

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 24.90

**Transaction ID : 1b99fca2-1522-48ce-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 124.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377540

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Charity Zerbel

Mailing Address 804 Mary Ave

City: Neosho State: MO Zip Code: 64850

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 25.00

**Transaction ID : acafcee6-607f-4216-8**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Charity Zerbel

Mailing Address 804 Mary Ave

City: Neosho State: MO Zip Code: 64850

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 16.20

**Transaction ID : ea154324-4372-4dc5-b**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 41.20

**(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.

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951377541

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 85.00

**Transaction ID : 3a57d9a9-3e0f-4d4c-b**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 15.00

**Transaction ID : 07f19e31-57ab-4960-8**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 100.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377542

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 80.00

**Transaction ID : 4adbe53b-0f16-43b0-a**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 12.00

**Transaction ID : 05a22e91-5f99-4610-b**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 92.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 80.00

**Transaction ID : 541dd9d8-fa9a-476a-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 28.20

**Transaction ID : aedf24ae-67a8-4293-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 108.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377544

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Billy Martin

Mailing Address 250 JS Brewton rd

City goldonna State LA Zip Code 71031

Purpose of Expenditure Salary

Category/Type 001

Date of Public Distribution/Dissemination 08 / 05 / 2014

Amount 90.00

**Transaction ID : d31fe930-d229-4000-8**

Date of Disbursement or Obligation 08 / 05 / 2014

Name of Federal Candidate Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Billy Martin

Mailing Address 250 JS Brewton rd

City goldonna State LA Zip Code 71031

Purpose of Expenditure Mileage

Category/Type 002

Date of Public Distribution/Dissemination 08 / 05 / 2014

Amount 9.00

**Transaction ID : 7a7bc255-b3b8-48b7-a**

Date of Disbursement or Obligation 08 / 05 / 2014

Name of Federal Candidate Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 99.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377545

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 80.00

**Transaction ID : ff72f8de-5afe-4e94-b**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 28.20

**Transaction ID : 942e7c8d-fc56-4637-b**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 108.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377546

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Buchanan

Mailing Address 1090 McHone Rd

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 45.00

**Transaction ID : 5355d034-2437-4427-a**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Run and Win

Mailing Address P.O. Box 2096

City: Aiken State: SC Zip Code: 29802

Purpose of Expenditure: Posters
Category/Type: 004

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 1257.67

**Transaction ID : 64f9fcb8-1e1d-497e-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 1302.67

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377547

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Run and Win

Mailing Address P.O. Box 2096

City Aiken State SC Zip Code 29802

Purpose of Expenditure
Posters

Category/Type 004

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
1257.67

**Transaction ID : afad6442-88c6-49f6-a**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Run and Win

Mailing Address P.O. Box 2096

City Aiken State SC Zip Code 29802

Purpose of Expenditure
Posters

Category/Type 004

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
1257.66

**Transaction ID : 87038556-5e58-4ecd-a**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 2515.33

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377548

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Trace Strategies, LLC

Mailing Address 11104 Westpoint Court

City: Little Rock State: AR Zip Code: 72211

Purpose of Expenditure: advertising

Category/Type: 004

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 212.23

**Transaction ID : 941b4805-0478-48cd-a**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Gabriella E Hansen

Mailing Address 310 West Meath Drive

City: Winterville State: NC Zip Code: 28590

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 20.00

**Transaction ID : 9e16e824-ff3c-437d-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 232.23

**(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377549

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gabriella E Hansen

Mailing Address 310 West Meath Drive

City Winterville | State NC | Zip Code 28590

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
9.00

**Transaction ID : 2c3a1463-dcf4-4514-a**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Allie Butler

Mailing Address 1676 Shady Creek Rd

City Ayden | State NC | Zip Code 28513

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
40.00

**Transaction ID : 7ca30518-1802-44b3-9**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 49.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377550

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Allie Butler

Mailing Address 1676 Shady Creek Rd

City: Ayden State: NC Zip Code: 28513

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 12.99

**Transaction ID : 6ece17ea-5158-42a0-a**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Bonnie C Blackburn

Mailing Address 2261 King George Ct.

City: Winston-Salem State: NC Zip Code: 27103

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 25.00

**Transaction ID : f4ec9949-7a98-4f9b-9**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 37.99

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377551

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Bonnie C Blackburn

Mailing Address 2261 King George Ct.

City: Winston-Salem State: NC Zip Code: 27103

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 5.10

**Transaction ID : 0ee02bb9-b255-4147-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City: Spindale State: NC Zip Code: 28160

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 60.00

**Transaction ID : a775f3f2-531d-4055-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 65.10

**(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377552

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City: Spindale State: NC Zip Code: 28160

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 7.20

**Transaction ID : 7737e2cc-3353-49e9-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Theresa A Touchet

Mailing Address 102 French Street #3

City: New Orleans State: LA Zip Code: 70124

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 7.00

**Transaction ID : 081be7f9-2aab-4504-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 14.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377553

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Theresa A Touchet

Mailing Address 102 French Street #3

City: New Orleans State: LA Zip Code: 70124

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 0.30

**Transaction ID : 8429f3c4-4242-4bff-9**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Morgan R Padgett

Mailing Address 2164 Kay Rd

City: Greenville State: NC Zip Code: 27858

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 20.00

**Transaction ID : 7123bc13-bbe7-456f-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 20.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377554

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Casey Stockton

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 45.00

**Transaction ID : 816c979e-67b9-4b11-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Casey Stockton

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 22.20

**Transaction ID : 66f729d5-5e33-48db-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 67.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377555

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mary Johnson

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 45.00

**Transaction ID : 1431a32f-2998-4659-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Felice Barrett

Mailing Address 1588 Asbury

City: Springdale State: AR Zip Code: 72762

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 50.00

**Transaction ID : 05a0dd5b-ce94-434d-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 95.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377556

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Felice Barrett

Mailing Address 1588 Asbury

City: Springdale State: AR Zip Code: 72762

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 12.00

**Transaction ID : 4711e3c4-5223-4877-9**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 80.00

**Transaction ID : f1190d6e-46f3-4891-a**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 92.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377557

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 24.66

**Transaction ID : a20aadbb-5e4c-4d00-a**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Antoinette Franklin

Mailing Address 8822 Apple St

City: New Orleans State: LA Zip Code: 70188

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 50.00

**Transaction ID : 9274ac79-af5e-487f-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 74.66

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Xavier Miller

Mailing Address 407 randall Dr

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 35.00

**Transaction ID : 346514e6-bc4b-4ee0-a**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Amanda Boley

Mailing Address Split Oak Drive

City: charlotte State: NC Zip Code: 28227

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 45.00

**Transaction ID : 7f2b0898-e502-44c7-a**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 80.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377559

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amanda Boley

Mailing Address
Split Oak Drive

City: charlotte
State: NC
Zip Code: 28227

Purpose of Expenditure
Mileage

Category/Type: 002

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
23.10

**Transaction ID : 95fafb15-6761-4cfc-a**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Christopher Pollreis

Mailing Address
15.5 Magnolia Circle

City: Searcy
State: AR
Zip Code: 72143

Purpose of Expenditure
Salary

Category/Type: 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
35.00

**Transaction ID : 655764f3-9188-489c-9**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 58.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377560

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Pollreis

Mailing Address 15.5 Magnolia Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
10.11

**Transaction ID : b692a3e2-59c1-4306-8**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mr. Alex Peyton

Mailing Address 859 Hicks Rd

City Washington | State LA | Zip Code 70589

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
80.00

**Transaction ID : 1da2f741-9cfd-4d72-8**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 90.11

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377561

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Alex Peyton

Mailing Address 859 Hicks Rd

City: Washington State: LA Zip Code: 70589

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 45.00

**Transaction ID : 43019614-8e41-4eab-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Barbara A Williams

Mailing Address 3002 Darden Rd
Apt A

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 100.00

**Transaction ID : 983d5eb2-a7f6-40f0-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 145.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377562

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City Metaire | State LA | Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
15.00

**Transaction ID : 94eb0438-4f96-4693-b**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City Metaire | State LA | Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
0.30

**Transaction ID : fa6b4b28-3d27-40a6-8**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 15.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377563

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 90.00

**Transaction ID : 6332416d-d277-4b22-9**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 11.10

**Transaction ID : 360d0253-02fd-4f69-a**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 101.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377564

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 40.00

**Transaction ID : 5f5712ac-8f14-4eb1-9**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 12.30

**Transaction ID : eba119ce-2cf1-4333-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 52.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377565

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Sharon Lloyd

Mailing Address 4301 Lankford

City: Springdale State: AR Zip Code: 72762

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 50.00

**Transaction ID : 1f707d1e-dcea-41d1-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Sharon Lloyd

Mailing Address 4301 Lankford

City: Springdale State: AR Zip Code: 72762

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 1.20

**Transaction ID : 1ac1d0be-2764-46fd-a**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 51.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377566

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ky Broussard

Mailing Address 301 N Cedar Street

City: Abbeville State: LA Zip Code: 70510

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 50.00

**Transaction ID : 70d956c2-219a-438d-a**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ky Broussard

Mailing Address 301 N Cedar Street

City: Abbeville State: LA Zip Code: 70510

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 13.50

**Transaction ID : d3a3a97e-ece1-4051-a**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 63.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377567

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brittany Jones

Mailing Address 338 Wayne Drive

City Shreveport State LA Zip Code 71105

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
30.00

**Transaction ID : 1b1d5aa9-8ff6-4dee-a**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brittany Jones

Mailing Address 338 Wayne Drive

City Shreveport State LA Zip Code 71105

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
1.50

**Transaction ID : 4c5652a5-4ad3-4bd0-b**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 31.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377568

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 80.00

**Transaction ID : dcdc1479-43f5-4070-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 24.66

**Transaction ID : 36d901b2-4b16-4f91-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 104.66

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377569

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Chassidy Menard

Mailing Address 515 Walter Dr.

City: Lafayette State: LA Zip Code: 70507

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 30.00

**Transaction ID : dd8e461a-c34b-4761-9**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Chassidy Menard

Mailing Address 515 Walter Dr.

City: Lafayette State: LA Zip Code: 70507

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 7.50

**Transaction ID : c4d408f8-77f4-43ad-a**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 37.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377570

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
100.00

**Transaction ID : 14b5fcde-4884-4e9f-8**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
32.10

**Transaction ID : 46ca754d-da07-4474-8**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 132.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
75.00

**Transaction ID : c2bcb6bf-993d-4b78-8**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
27.00

**Transaction ID : ef20915a-ea96-42b2-8**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 102.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377572

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Beverly Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
75.00

**Transaction ID : 41cf736a-0288-4609-9**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eric Wilson

Mailing Address 907 Randall Drive

City Searcy State AR Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
15.00

**Transaction ID : 99cd0e51-807e-4a87-a**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 90.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377573

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eric Wilson

Mailing Address 907 Randall Drive

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
15.00

**Transaction ID : 319d1813-dcb9-4194-8**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City Raleigh | State NC | Zip Code 27604

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
25.00

**Transaction ID : c51d2b31-b74e-42b2-8**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 40.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377574

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 8.70

**Transaction ID : 3a3ffbaa-581e-4027-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City: Wilmington State: NC Zip Code: 28405

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 60.00

**Transaction ID : 0b2e857d-8da9-421c-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 68.70

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377575

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City: Wilmington State: NC Zip Code: 28405

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 15.00

**Transaction ID : 0a266778-ce3e-4b52-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 40.00

**Transaction ID : af2c73c6-a8be-423b-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 55.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 35.10

**Transaction ID : 70d9ee1e-6a8a-4dfd-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Billy Martin

Mailing Address 250 JS Brewton rd

City: goldonna State: LA Zip Code: 71031

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 60.00

**Transaction ID : 1fd97957-b794-4fff-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 95.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377577

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Billy Martin

Mailing Address 250 JS Brewton rd

City: goldonna State: LA Zip Code: 71031

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 5.40

**Transaction ID : e94f951d-7481-4da6-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City: Shreveport State: LA Zip Code: 71104

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 30.00

**Transaction ID : f2e80c6b-a168-496c-a**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 35.40

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377578

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport | State LA | Zip Code 71104

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
11.70

**Transaction ID : 38f16264-999b-4244-8**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City New Orleans | State LA | Zip Code 70131

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
90.00

**Transaction ID : 133f0b5c-fc68-4ad9-b**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 101.70

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377579

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 14.40

**Transaction ID : 46b09759-3580-40be-9**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City: Shreveport State: LA Zip Code: 71119

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 80.00

**Transaction ID : f1c9ee98-2bcf-436e-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 94.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377580

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
24.30

**Transaction ID : ee9243fd-02eb-45ae-8**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Andrew Shiver

Mailing Address 110 Earlston Ct

City Knightdale State NC Zip Code 27545

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
35.00

**Transaction ID : c0d696f5-19db-4d9d-8**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 59.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377581

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Roger McKinney

Mailing Address 308 West Main Street

City: Pilot Mountian State: NC Zip Code: 27041

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 115.00

**Transaction ID : b9def1ed-6e1f-47d8-a**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mr. Roger McKinney

Mailing Address 308 West Main Street

City: Pilot Mountian State: NC Zip Code: 27041

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 19.86

**Transaction ID : c3f6f5ea-3fe4-4253-a**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 134.86

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Glenda McKinney

Mailing Address 308 West Main Street

City: Plot Mountain State: NC Zip Code: 27041

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 115.00

**Transaction ID : aae1bb43-3ee3-46ba-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lesley Lennox

Mailing Address 2305 Cleary Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 20.00

**Transaction ID : 6e795433-f80a-4c06-a**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 135.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377583

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lesley Lennox

Mailing Address 2305 Cleary Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 1.80

**Transaction ID : 0c678235-0545-4f70-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francesca Blom

Mailing Address 101 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 65.00

**Transaction ID : c4bc834a-a2f8-4858-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 66.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377584

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City Ville Platte | State LA | Zip Code 70586

Purpose of Expenditure Salary | Category/Type 001

Date of Public Distribution/Dissemination 08 / 05 / 2014

Amount 50.00

**Transaction ID : 89c97068-ea94-4ba3-a**

Date of Disbursement or Obligation 08 / 05 / 2014

Name of Federal Candidate Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City Ville Platte | State LA | Zip Code 70586

Purpose of Expenditure Mileage | Category/Type 002

Date of Public Distribution/Dissemination 08 / 05 / 2014

Amount 34.80

**Transaction ID : 0f3a6f05-6d2f-45f2-a**

Date of Disbursement or Obligation 08 / 05 / 2014

Name of Federal Candidate Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 84.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377585

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 17.50

**Transaction ID : e0eb866c-7e9a-4e67-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 3.30

**Transaction ID : e43ce80b-f515-4899-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 20.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377586

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nathan D Wirebaugh

Mailing Address 7320 Red Maple Dr

City Holland State OH Zip Code 43528

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
50.00

**Transaction ID : ac5cf00e-ea2c-4c07-9**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City Sterling State VA Zip Code 20165

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
40.00

**Transaction ID : 71d8201a-2ba2-48cf-9**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 90.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377587

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City Newport | State NC | Zip Code 28570

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
40.00

**Transaction ID : c83bd94a-1075-40a0-8**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City Newport | State NC | Zip Code 28570

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
13.20

**Transaction ID : b740357b-b8e5-494d-b**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 53.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377588

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City Raleigh | State NC | Zip Code 27610

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
31.50

**Transaction ID : 0731b4e8-67e4-461a-a**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City Raleigh | State NC | Zip Code 27610

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
7.50

**Transaction ID : 384f79e0-edbd-418c-b**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 39.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377589

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brennan McAndrews

Mailing Address 44188 South Baptist RD

City Hammond | State LA | Zip Code 70403

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
20.00

**Transaction ID : 8e2d7871-803a-4920-b**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brennan McAndrews

Mailing Address 44188 South Baptist RD

City Hammond | State LA | Zip Code 70403

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
1.50

**Transaction ID : d25dff90-103b-419d-a**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 21.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377590

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Laura U Logie

Mailing Address 2565 Shire Circle

City Harrisonburg State VA Zip Code 22801

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
30.00

**Transaction ID : 33479076-b938-4855-a**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Vonniqua Jackson

Mailing Address 111 Westchester Blvd
Apt D4

City Slidell State LA Zip Code 70458

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
40.00

**Transaction ID : ce4396ed-85a1-43e2-9**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 70.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377591

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Warren Gravois

Mailing Address 16005 7th St

City: Pearlington State: MS Zip Code: 39572

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 25.00

**Transaction ID : bb3de612-d47f-419d-a**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Warren Gravois

Mailing Address 16005 7th St

City: Pearlington State: MS Zip Code: 39572

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 1.41

**Transaction ID : 5e2aee9a-9f08-47d5-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 26.41

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377592

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 35.00

**Transaction ID : 822c58d0-2811-4c7f-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 7.20

**Transaction ID : 38cb9ac4-166a-4c6e-9**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 42.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377593

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City Lafayette | State LA | Zip Code 70503

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
30.00

**Transaction ID : 5bf8733c-4a8e-4cdb-8**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City Lafayette | State LA | Zip Code 70503

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
1.80

**Transaction ID : 3cf588df-ef8d-4810-b**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 31.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377594

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Reagan Brackett

Mailing Address 502 E Center Ave

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
40.00

**Transaction ID : 28976413-5fdf-43c7-8**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Reagan Brackett

Mailing Address 502 E Center Ave

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
18.45

**Transaction ID : 48a5a256-256a-4ff7-9**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 58.45

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377595

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 40.00

**Transaction ID : 9d7e2025-e02e-4041-a**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 4.80

**Transaction ID : 6c0d9432-6364-459e-9**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 44.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377596

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eric J Smith

Mailing Address 4967 Dysartville

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 80.00

**Transaction ID : fae72bdd-07f2-467c-9**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Courtney Goldstein

Mailing Address 1809 N Woodlawn

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 40.00

**Transaction ID : 6265fa0e-c043-4398-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 120.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377597

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Courtney Goldstein

Mailing Address 1809 N Woodlawn

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 4.50

**Transaction ID : 5b51310f-6e5c-411a-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jonathan Odette

Mailing Address 9600 Earpsboro Chamblee Road

City: Wendell State: NC Zip Code: 27591

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 35.00

**Transaction ID : f6c5f29f-fe45-4f55-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 39.50

(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377598

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jonathan Odette

Mailing Address 9600 Earpsboro Chamblee Road

City: Wendell State: NC Zip Code: 27591

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 22.80

**Transaction ID : 05956aa4-38f5-4d6e-a**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 80.00

**Transaction ID : 527bada1-2318-431c-a**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 102.80

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377599

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 7.50

**Transaction ID : 3b2a5095-e813-4667-a**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City: METAIRIE State: LA Zip Code: 70003

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 65.00

**Transaction ID : 2ed498e6-953b-48c0-9**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 72.50

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377600

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
0.90

**Transaction ID : fdd3f50c-2ffe-472b-b**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Taylor N Randall

Mailing Address 2002 E Park Ave
Apt 40

City Searcy State AR Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
60.00

**Transaction ID : 71adc369-9d01-4932-8**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 60.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377601

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Taylor N Randall

Mailing Address
2002 E Park Ave
Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 24.45

**Transaction ID : ecfe20e3-edea-4366-a**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Tarrin Lesaicherre

Mailing Address
629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 70.00

**Transaction ID : 5a0db952-b87a-47e3-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 94.45

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377602

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tarrin Lesaicherre

Mailing Address 629 Radiance Ave

City Metairie | State LA | Zip Code 70001

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
6.30

**Transaction ID : 3d61e05f-7ad8-4210-b**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tabetha D Espenschied

Mailing Address 2002 East Park Ave
Apt 40

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
60.00

**Transaction ID : 18a0cca3-edd1-4057-a**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 66.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377603

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Evelyn Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 70.00

**Transaction ID : 28173a61-6bd1-4856-a**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Evelyn Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 6.30

**Transaction ID : e88c9722-7918-4104-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 76.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377604

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brandon Guttuso

Mailing Address 3013 Transcontinental Dr

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 70.00

**Transaction ID : b4aa1da0-42eb-4535-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Brandon Guttuso

Mailing Address 3013 Transcontinental Dr

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 6.30

**Transaction ID : 59103a45-aa06-4e39-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 76.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377605

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 55.00

**Transaction ID : bc50a46a-99bd-4352-9**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 28.80

**Transaction ID : 9b26e560-e081-4a05-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 83.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377606

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Emily Butler

Mailing Address 1676 Shady Creek Rd

City: Ayden State: NC Zip Code: 28513

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 42.50

**Transaction ID : 6d99fb8b-fa2c-4340-9**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Emily Butler

Mailing Address 1676 Shady Creek Rd

City: Ayden State: NC Zip Code: 28513

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 12.99

**Transaction ID : 8bdc54ff-9fd4-4799-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 55.49

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377607

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Benjamin Hernandez

Mailing Address 915 E Market Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
45.00

**Transaction ID : 30434ebc-65e2-421e-a**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Benjamin Hernandez

Mailing Address 915 E Market Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
19.20

**Transaction ID : db94b40f-4728-45ad-9**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 64.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Wayne Burckel

Mailing Address 46 Glenwood Ave

City Harahan | State LA | Zip Code 70123

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
50.00

**Transaction ID : 6b5d5fcc-d320-4add-b**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City High Point | State NC | Zip Code 27260

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
85.00

**Transaction ID : 6d39d53b-4c1c-4905-8**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 135.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377609

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 21.60

**Transaction ID : 2ac78eea-d88d-46c7-9**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 80.00

**Transaction ID : 357f8be4-042f-4294-9**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 101.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 21.90

**Transaction ID : c6671c2c-a566-4129-9**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Najib Mahmud

Mailing Address 3432 Riverrock Ct

City: Baton Rouge State: LA Zip Code: 70820

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 60.00

**Transaction ID : 0e1ee8ee-fe91-47ec-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 81.90

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377611

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Najib Mahmud

Mailing Address 3432 Riverrock Ct

City: Baton Rouge State: LA Zip Code: 70820

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 4.50

**Transaction ID : 5916919c-c587-4bb7-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Amelia Brackett

Mailing Address 804 Roundabout Circle

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 60.00

**Transaction ID : 444417fe-2797-4c3e-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 64.50

(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377612

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amelia Brackett

Mailing Address 804 Roundabout Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
10.62

**Transaction ID : 65e88ca5-fdfc-46ba-8**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Amelia Brackett

Mailing Address 804 Roundabout Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
60.00

**Transaction ID : 49737644-8201-48d3-9**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 70.62

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377613

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amelia Brackett

Mailing Address 804 Roundabout Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
10.62

**Transaction ID : b87b80e3-078b-42c0-b**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City Winchester | State VA | Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 05 / 2014

Amount
60.00

**Transaction ID : 0c8242a2-0338-4d32-b**

Date of Disbursement or Obligation
08 / 05 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 70.62

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377614

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 60.00

**Transaction ID : 59e7a724-7745-48b4-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rodney D Culbreth

Mailing Address 100 Asbury CT
3200 Dam Neck Rd

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 60.00

**Transaction ID : 009da049-6eae-4eb7-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 120.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rze Culbreath

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 60.00

**Transaction ID : c9af6ab5-c3d8-437d-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 50.00

**Transaction ID : b0df17a5-f3e6-4f82-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 110.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377616

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 90.00

**Transaction ID : a42eb610-1c0b-441d-b**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 23.70

**Transaction ID : 269c225d-7bac-4adf-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 113.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377617

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeanine Holmes

Mailing Address 206 Wildwood Dr

City: Hammond State: LA Zip Code: 70401

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 20.00

**Transaction ID : 8f6c6929-dec1-44ce-8**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeanine Holmes

Mailing Address 206 Wildwood Dr

City: Hammond State: LA Zip Code: 70401

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 05 / 2014

Amount: 2.10

**Transaction ID : f7bd5a2c-c14d-4f00-9**

Date of Disbursement or Obligation: 08 / 05 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 22.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377618

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 80.00

**Transaction ID : e5cbe7c1-97e5-4da4-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 12.00

**Transaction ID : dd05c769-589c-43f3-b**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 92.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377619

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Antonetz

Mailing Address 11127 Gila Valley Dr

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 30.00

**Transaction ID : 98b77859-000c-4386-a**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James Antonetz

Mailing Address 11127 Gila Valley Dr

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 9.60

**Transaction ID : 38d914ca-ea93-4414-a**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 39.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377620

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Bonnie C Blackburn

Mailing Address 2261 King George Ct.

City: Winston-Salem State: NC Zip Code: 27103

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 15.00

**Transaction ID : a1f1666c-970d-43f5-8**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Bonnie C Blackburn

Mailing Address 2261 King George Ct.

City: Winston-Salem State: NC Zip Code: 27103

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 6.45

**Transaction ID : b75867a9-a4d0-4e92-b**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 21.45

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377621

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Morgan R Padgett

Mailing Address 2164 Kay Rd

City Greenville State NC Zip Code 27858

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
20.00

**Transaction ID : 4dbfb1c0-2af1-4dc7-8**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Morgan R Padgett

Mailing Address 2164 Kay Rd

City Greenville State NC Zip Code 27858

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
10.20

**Transaction ID : e5aa3952-5ce1-47f0-9**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 30.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377622

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gabriella E Hansen

Mailing Address 310 West Meath Drive

City: Winterville State: NC Zip Code: 28590

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 20.00

**Transaction ID : 643e0647-49a9-4315-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Allie Butler

Mailing Address 1676 Shady Creek Rd

City: Ayden State: NC Zip Code: 28513

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 30.00

**Transaction ID : 1dec80f8-51e4-481e-8**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 50.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377623

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Allie Butler

Mailing Address 1676 Shady Creek Rd

City: Ayden State: NC Zip Code: 28513

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 9.90

**Transaction ID : 28d00f1d-184f-4e5c-8**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Emily Butler

Mailing Address 1676 Shady Creek Rd

City: Ayden State: NC Zip Code: 28513

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 26.70

**Transaction ID : 7a235eca-628b-4352-a**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 36.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377624

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Emily Butler

Mailing Address 1676 Shady Creek Rd

City: Ayden State: NC Zip Code: 28513

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 9.90

**Transaction ID : 4fc89597-578e-4de0-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 45.00

**Transaction ID : 05a837bd-35c2-4fa8-a**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 54.90

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377625

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 15.60

**Transaction ID : 3fff6d2e-9755-4160-b**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Matt Curran

Mailing Address 1537 Country Lane

City: Kernersville State: NC Zip Code: 27284

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 31.50

**Transaction ID : 7b03dbb4-71c3-4523-8**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 47.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377626

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Matt Curran

Mailing Address 1537 Country Lane

City: Kernersville State: NC Zip Code: 27284

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 6.30

**Transaction ID : 44e2ecd1-774f-4998-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shantal C Culbreath

Mailing Address 4691 Hercules Lane

City: Woodbridge State: VA Zip Code: 22193

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 80.00

**Transaction ID : a7c4ab5f-5f0c-4c92-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 86.30

(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377627

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joseph P Thierfelder
Previously filed under the name Pthierfelder

Mailing Address 2411 Armstrong

City Gastonia | State NC | Zip Code 28054

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
60.00

**Transaction ID : 7f271315-c86e-4fe1-a**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joseph P Thierfelder
Previously filed under the name Pthierfelder

Mailing Address 2411 Armstrong

City Gastonia | State NC | Zip Code 28054

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
9.00

**Transaction ID : 6848b638-7ac2-470a-b**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 69.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377628

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City Newport | State NC | Zip Code 28570

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
50.00

**Transaction ID : 9ee6e59c-f9dc-43d9-b**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City Newport | State NC | Zip Code 28570

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
13.26

**Transaction ID : 41bed4d2-df32-41a9-9**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 63.26

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377629

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City Spindale | State NC | Zip Code 28160

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
85.00

**Transaction ID : f8a9a1b8-0b2a-49e4-a**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City Spindale | State NC | Zip Code 28160

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
10.35

**Transaction ID : 8826e6ca-33a6-4b8b-8**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 95.35

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377630

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 30.00

**Transaction ID : d6e64f97-d47c-4743-b**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 14.70

**Transaction ID : f92159e0-37c9-417f-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 44.70

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377631

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
80.00

**Transaction ID : 5a75b22f-7f0b-449d-9**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
27.30

**Transaction ID : b584aa18-c207-4443-9**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 107.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377632

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kassidy L Tyer

Mailing Address 41 Hawk Hollow Trail

City: Burgaw State: NC Zip Code: 28425

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 25.00

**Transaction ID : ab2976e6-e8dc-400d-b**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Kassidy L Tyer

Mailing Address 41 Hawk Hollow Trail

City: Burgaw State: NC Zip Code: 28425

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 12.33

**Transaction ID : c8066d8c-153d-4253-8**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 37.33

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377633

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 10.00

**Transaction ID : cde24bf6-7712-4552-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 0.30

**Transaction ID : 60aa0ccb-a9dd-4c8e-8**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 10.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377634

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Caleb Craig

Mailing Address 1410 Bushville drive

City Lenoir | State NC | Zip Code 28645

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
50.00

**Transaction ID : 119f8b28-b82a-43b8-a**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Caleb Craig

Mailing Address 1410 Bushville drive

City Lenoir | State NC | Zip Code 28645

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
35.40

**Transaction ID : 606fe82d-52cf-49de-a**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 85.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377635

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Aston J Rosenberg

Mailing Address 530 S Donaghey Apt 4301

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 20.00

**Transaction ID : ae28ca49-5eeb-491e-a**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Aston J Rosenberg

Mailing Address 530 S Donaghey Apt 4301

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 7.50

**Transaction ID : 1e1371ff-f231-47a4-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 27.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377636

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Aston J Rosenberg

Mailing Address 530 S Donaghey Apt 4301

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 20.00

**Transaction ID : d9c5b7c2-0676-4ccb-8**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Aston J Rosenberg

Mailing Address 530 S Donaghey Apt 4301

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 7.50

**Transaction ID : a0bd6eed-4ebc-4af1-b**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 27.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377637

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City: Wilmington State: NC Zip Code: 28405

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 30.00

**Transaction ID : b19859c8-02a0-484b-b**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City: Wilmington State: NC Zip Code: 28405

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 9.30

**Transaction ID : ff82ac9d-d14c-4c03-b**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 39.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377638

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Parker H Morrow

Mailing Address 506 N Horton Street

City Searcy State AR Zip Code 72143

Purpose of Expenditure Salary

Category/Type 001

Date of Public Distribution/Dissemination 08 / 06 / 2014

Amount 40.00

**Transaction ID : 4115db4f-0550-4983-a**

Date of Disbursement or Obligation 08 / 06 / 2014

Name of Federal Candidate Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Parker H Morrow

Mailing Address 506 N Horton Street

City Searcy State AR Zip Code 72143

Purpose of Expenditure Mileage

Category/Type 002

Date of Public Distribution/Dissemination 08 / 06 / 2014

Amount 8.97

**Transaction ID : 0179bf8e-c3e5-40b3-b**

Date of Disbursement or Obligation 08 / 06 / 2014

Name of Federal Candidate Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 48.97

**(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377639

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Xavier Miller

Mailing Address 407 randall Dr

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
40.00

**Transaction ID : 9ee3c7ef-f394-4c7d-8**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Christopher Pollreis

Mailing Address 15.5 Magnolia Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
40.00

**Transaction ID : 73686d10-cedc-4c6c-a**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 80.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377640

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Pollreis

Mailing Address 15.5 Magnolia Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
11.28

**Transaction ID : a6aa444d-146c-40cc-8**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Elizabeth Hanks

Mailing Address 891 W. Melmar

City Fayetteville | State AR | Zip Code 72703

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
25.00

**Transaction ID : bc53d7b9-4476-473d-8**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 36.28

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Elizabeth Hanks

Mailing Address 891 W. Melmar

City: Fayetteville State: AR Zip Code: 72703

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 6.30

**Transaction ID : 51d913f1-6ed4-4800-b**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Amanda Boley

Mailing Address Split Oak Drive

City: charlotte State: NC Zip Code: 28227

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 55.00

**Transaction ID : 1371d11c-3663-48bf-b**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 61.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amanda Boley

Mailing Address
Split Oak Drive

City: charlotte State: NC Zip Code: 28227

Purpose of Expenditure
Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 21.75

**Transaction ID : 9ac3e2d0-9626-4d12-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lisa Booth

Mailing Address
1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure
Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 100.00

**Transaction ID : cc696c51-0237-49b9-b**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 121.75

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377643

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 13.80

**Transaction ID : 6b91b1ed-00c5-4a95-b**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James Tatro

Mailing Address 1208 Braeburn Rd

City: Charlotte State: NC Zip Code: 28211

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 60.00

**Transaction ID : cd67b10e-d66a-4b09-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 73.80

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377644

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Tatro

Mailing Address 1208 Braeburn Rd

City: Charlotte State: NC Zip Code: 28211

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 5.70

**Transaction ID : c2453f5c-6198-43e1-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 20.00

**Transaction ID : ebb80fbb-be46-44ec-a**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 25.70

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377645

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 5.70

**Transaction ID : 8c553954-6f12-495e-8**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Barbara A Williams

Mailing Address 3002 Darden Rd
Apt A

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 100.00

**Transaction ID : f79c4392-80cd-438b-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 105.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377646

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City Search | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
40.00

**Transaction ID : ab95564c-d908-439c-8**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City Search | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
8.40

**Transaction ID : ae4b8eb2-4339-4c49-b**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 48.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377647

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carey T Henderson

Mailing Address 1025 Inverness Rd

City: Suthern Pines State: NC Zip Code: 28387

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 60.00

**Transaction ID : 2940c6cf-bf51-4d31-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Carey T Henderson

Mailing Address 1025 Inverness Rd

City: Suthern Pines State: NC Zip Code: 28387

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 12.30

**Transaction ID : 953e0d0e-9c9c-48d8-b**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 72.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377648

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Warren Gravois

Mailing Address 16005 7th St

City: Pearlington State: MS Zip Code: 39572

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 20.00

**Transaction ID : 4cc8e77f-b3a0-4db9-b**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Warren Gravois

Mailing Address 16005 7th St

City: Pearlington State: MS Zip Code: 39572

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 0.90

**Transaction ID : f41ff597-5840-4d88-8**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 20.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377649

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 37.50

**Transaction ID : 2a94a1ce-bce9-425f-8**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 15.30

**Transaction ID : 5528e5c3-ede7-43bf-b**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 52.80

(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.

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951377650

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 40.00

**Transaction ID : 61a568c4-dc1a-4c9f-a**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 4.26

**Transaction ID : 98571cec-2105-41ab-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 44.26

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377651

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 45.00

**Transaction ID : 110196b8-adab-4324-8**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 35.70

**Transaction ID : 6bc34da6-abc7-49e5-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 80.70

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377652

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Roger McKinney

Mailing Address 308 West Main Street

City: Pilot Mountian State: NC Zip Code: 27041

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 110.00

**Transaction ID : 75882c46-9642-4d10-a**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mr. Roger McKinney

Mailing Address 308 West Main Street

City: Pilot Mountian State: NC Zip Code: 27041

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 24.06

**Transaction ID : 8b80e2bc-914e-4503-a**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 134.06

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377653

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Glenda McKinney

Mailing Address 308 West Main Street

City: Plot Mountain State: NC Zip Code: 27041

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 110.00

**Transaction ID : eff116f6-a24f-4f84-a**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Dylan Simon

Mailing Address 111 Millrock Drive

City: Lafayette State: LA Zip Code: 70508

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 35.67

**Transaction ID : 6ef1431e-107e-4c74-b**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 145.67

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Dylan Simon

Mailing Address 111 Millrock Drive

City: Lafayette State: LA Zip Code: 70508

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 5.49

**Transaction ID : 3d02a0b4-8f92-4201-8**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shelby J Davis

Mailing Address 6414 The Divide Pkwy
Apt 204

City: Little Rock State: AR Zip Code: 72223

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 30.00

**Transaction ID : 569a4a47-b362-43c2-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 35.49

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shelby J Davis

Mailing Address
6414 The Divide Pkwy
Apt 204

City: Little Rock
State: AR
Zip Code: 72223

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 9.00

**Transaction ID : 7271d3b6-cf35-4d39-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Chassidy Menard

Mailing Address
515 Walter Dr.

City: Lafayette
State: LA
Zip Code: 70507

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 40.00

**Transaction ID : 7ee514b2-f6ef-42f6-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 49.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377656

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Chassidy Menard

Mailing Address 515 Walter Dr.

City Lafayette | State LA | Zip Code 70507

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
8.10

**Transaction ID : 150f605a-a28a-44cc-b**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE | State LA | Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
55.00

**Transaction ID : c79a614b-27c4-496d-9**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 63.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
0.30

**Transaction ID : 771929ec-df2b-4972-a**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
100.00

**Transaction ID : 7ea9ea94-f617-433a-a**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 100.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377658

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
24.00

**Transaction ID : 841ea87f-8b63-4635-9**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City Spindale State NC Zip Code 28160

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
10.00

**Transaction ID : 8298cffb-0a39-4747-b**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 34.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377659

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City Spindale State NC Zip Code 28160

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
0.30

**Transaction ID : dc0e7d15-d139-4b58-b**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
30.00

**Transaction ID : 4527bee9-85f3-4220-a**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 30.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377660

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
15.90

**Transaction ID : 36e24a30-0b07-4ca5-8**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lisa Miller

Mailing Address 718 Azalea Dr.
Unit 453

City Hampstead State NC Zip Code 28443

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
40.00

**Transaction ID : 2db54f42-b03d-4d1b-9**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 55.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377661

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Miller

Date of Public Distribution/Dissemination
08 / 06 / 2014

Mailing Address
718 Azalea Dr.
Unit 453

Amount
6.00

City: Hampstead
State: NC
Zip Code: 28443

**Transaction ID : 8adfb530-c776-4bdc-9**

Purpose of Expenditure
Mileage

Category/Type: 002

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nick Berryhill

Date of Public Distribution/Dissemination
08 / 06 / 2014

Mailing Address
905 Lake Drive

Amount
75.00

City: Shelby
State: NC
Zip Code: 28152

**Transaction ID : d9cb0694-d0dc-4c91-9**

Purpose of Expenditure
Salary

Category/Type: 001

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 81.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377662

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City: Shelby State: NC Zip Code: 28152

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 30.60

**Transaction ID : a42bd333-7f31-411f-b**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francesca Blom

Mailing Address 101 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 90.00

**Transaction ID : 758c7bf0-4de2-4cad-a**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 120.60

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377663

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
30.00

**Transaction ID : 0c5904d0-4f02-4de9-b**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
11.10

**Transaction ID : 286eaa15-da26-4b22-8**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 41.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377664

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lesley Lennox

Mailing Address 2305 Cleary Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 22.50

**Transaction ID : d931a9b9-ac0a-4305-8**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lesley Lennox

Mailing Address 2305 Cleary Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 1.80

**Transaction ID : 9c14ee85-6d07-40b3-8**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 24.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377665

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Casey Stockton

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 65.00

**Transaction ID : ca51cc7b-9a95-48be-a**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Casey Stockton

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 21.30

**Transaction ID : b6f41596-1d5b-4f07-a**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 86.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377666

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mary Johnson

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 65.00

**Transaction ID : a79f62fa-1c12-4817-b**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 90.00

**Transaction ID : 590dea27-39ec-4836-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 155.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377667

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 25.02

**Transaction ID : 338c1a66-1440-4222-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 45.00

**Transaction ID : 9c764f39-d74f-48b5-a**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 70.02

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377668

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City Raleigh | State NC | Zip Code 27604

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
11.40

**Transaction ID : 53c4f8b0-72dd-475f-b**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Courtney Goldstein

Mailing Address 1809 N Woodlawn

City Metairie | State LA | Zip Code 70001

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
50.00

**Transaction ID : 9a03af20-03bc-42a3-a**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 61.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Courtney Goldstein

Mailing Address 1809 N Woodlawn

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 6.00

**Transaction ID : 59512966-1bf6-46b9-8**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rebecca A Calvert

Mailing Address 20116 Medus St

City: Covington State: LA Zip Code: 70435

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 12.50

**Transaction ID : 2b7688ee-a0a0-45fb-8**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 18.50

(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rebecca A Calvert

Mailing Address 20116 Medus St

City Covington | State LA | Zip Code 70435

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
3.12

**Transaction ID : 92b3f1c7-c9ed-4d86-8**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City Raleigh | State NC | Zip Code 27610

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
33.00

**Transaction ID : b98cd92d-a790-4578-b**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 36.12

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City Raleigh | State NC | Zip Code 27610

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
8.40

**Transaction ID : 533e4b55-bc37-4eed-9**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Melissa A Calvert

Mailing Address 20116 Medus St

City Covington | State LA | Zip Code 70435

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
12.50

**Transaction ID : 7cc1c876-4581-4ebc-a**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 20.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377672

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 60.00

**Transaction ID : e273dce6-0075-40cc-a**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 40.00

**Transaction ID : d1ae6e0d-5a8a-4084-a**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 100.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377673

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City Winchester State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
60.00

**Transaction ID : d273f07f-238d-4991-9**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rodney D Culbreth

Mailing Address 100 Asbury CT
3200 Dam Neck Rd

City Winchester State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
60.00

**Transaction ID : 7ee717e1-a7c0-4713-a**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 120.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377674

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rze Culbreath

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 60.00

**Transaction ID : 6c2f81b2-e4fa-4e1b-a**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brandon Guttuso

Mailing Address 3013 Transcontinental Dr

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 70.00

**Transaction ID : 779e992b-f145-490a-8**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 130.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brandon Guttuso

Mailing Address 3013 Transcontinental Dr

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 6.00

**Transaction ID : f4d66ace-a596-4a52-8**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 25.00

**Transaction ID : 3546cd6c-52d9-4fd2-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 31.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 2.61

**Transaction ID : 3a326048-9cab-4cc1-a**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Tarrin Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 70.00

**Transaction ID : c39773de-7f38-4cd9-b**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 72.61

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377677

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tarrin Lesaicherre

Mailing Address 629 Radiance Ave

City Metairie | State LA | Zip Code 70001

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
6.00

**Transaction ID : 1f3fdb55-59e2-40fd-8**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 554635.78

Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

Full Name of Payee
Eric J Smith

Mailing Address 4967 Dysartville

City Morganton | State NC | Zip Code 28655

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
80.00

**Transaction ID : aef94b68-169b-4cc9-9**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 1095959.94

Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 86.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377678

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 80.00

**Transaction ID : 2243985d-fba4-40ef-8**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 10.50

**Transaction ID : 23fe3af2-98f0-4b35-8**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 90.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377679

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Laura U Logie

Mailing Address 2565 Shire Circle

City Harrisonburg State VA Zip Code 22801

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
20.00

**Transaction ID : aaac7d68-4ec4-4594-b**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Najib Mahmud

Mailing Address 3432 Riverrock Ct

City Baton Rouge State LA Zip Code 70820

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
50.00

**Transaction ID : ecf7289e-e36a-4b0f-8**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 70.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377680

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Najib Mahmud

Date of Public Distribution/Dissemination
08 / 06 / 2014

Mailing Address 3432 Riverrock Ct

Amount
4.20

City: Baton Rouge State: LA Zip Code: 70820

**Transaction ID : 12512e3b-2569-47cb-b**

Purpose of Expenditure
Mileage

Category/Type 002

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Billy Martin

Date of Public Distribution/Dissemination
08 / 06 / 2014

Mailing Address 250 JS Brewton rd

Amount
70.00

City: goldonna State: LA Zip Code: 71031

**Transaction ID : 62a911da-0ab7-4619-a**

Purpose of Expenditure
Salary

Category/Type 001

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 74.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377681

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Billy Martin

Mailing Address 250 JS Brewton rd

City goldonna State LA Zip Code 71031

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
6.00

**Transaction ID : bb65e62d-5def-475d-8**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City New Orleans State LA Zip Code 70131

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
100.00

**Transaction ID : a99ed8d2-ec3e-459a-8**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 106.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377682

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 17.10

**Transaction ID : 4f1b2a46-88b5-486a-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Evelyn Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 70.00

**Transaction ID : 0c61a8e2-c3a7-4ce6-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 87.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377683

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Evelyn Lesaicherre

Mailing Address 629 Radiance Ave

City Metairie | State LA | Zip Code 70001

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
7.80

**Transaction ID : d03abd9d-c2c4-4380-9**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City High Point | State NC | Zip Code 27260

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
60.00

**Transaction ID : 66256150-0592-48f9-9**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 67.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377684

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 22.20

**Transaction ID : e35ccf17-b45d-4bd7-b**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 20.00

**Transaction ID : eb22d46d-2c2c-4113-b**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 42.20

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377685

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
13.50

**Transaction ID : 8513e914-2d81-4ca9-8**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
90.00

**Transaction ID : 2e2c108a-ae33-41d2-9**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 103.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377686

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
20.70

**Transaction ID : 928e4786-92ac-4273-a**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Beverly Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
90.00

**Transaction ID : 303eef27-f735-4ef1-9**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 110.70

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377687

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Reagan Brackett

Mailing Address 502 E Center Ave

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
40.00

**Transaction ID : 7d6262f7-53df-46a7-b**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Reagan Brackett

Mailing Address 502 E Center Ave

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
5.49

**Transaction ID : 068d22dd-bbb3-4d5d-b**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 45.49

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377688

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeremy Hollar

Mailing Address 121 Meadowview Drive

City: Boone State: NC Zip Code: 28607

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 40.00

**Transaction ID : 773e35d4-0202-4b02-a**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeremy Hollar

Mailing Address 121 Meadowview Drive

City: Boone State: NC Zip Code: 28607

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 35.40

**Transaction ID : 29170832-3f15-44fe-9**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 75.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Wayne Burckel

Mailing Address 46 Glenwood Ave

City Harahan | State LA | Zip Code 70123

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
30.00

**Transaction ID : 185b064b-5233-4f96-8**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nathan Smith

Mailing Address 1247 W Mt Comfort Rd

City Fayatteville | State AR | Zip Code 72703

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 06 / 2014

Amount
35.00

**Transaction ID : 3943060b-bfa0-4a71-b**

Date of Disbursement or Obligation
08 / 06 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 65.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377690

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nathan Smith

Mailing Address 1247 W Mt Comfort Rd

City: Fayatteville State: AR Zip Code: 72703

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 4.38

**Transaction ID : eb9fcd1c-67d0-4cac-a**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 30.00

**Transaction ID : bdf9e376-6b20-427f-8**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 34.38

**(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377691

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 35.10

**Transaction ID : 21ba6b42-e299-4fec-a**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Marysol Netro

Mailing Address 312 S Gunter St

City: Siloam Springs State: AR Zip Code: 72761

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 06 / 2014

Amount: 20.00

**Transaction ID : df57e081-650f-4f6a-a**

Date of Disbursement or Obligation: 08 / 06 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 55.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 90.00

**Transaction ID : e3aa90f8-e26d-41ad-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 25.02

**Transaction ID : 81c03762-a802-4946-8**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 115.02

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377693

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Bonnie C Blackburn

Mailing Address 2261 King George Ct.

City: Winston-Salem State: NC Zip Code: 27103

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 20.00

**Transaction ID : aeee2486-351e-425c-a**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Pizza Hut

Mailing Address 1900 M St NW, Ste 102

City: Washington State: DC Zip Code: 20036

Purpose of Expenditure: Food
Category/Type: 007

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 57.52

**Transaction ID : 48db7949-ddfd-4d48-b**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 77.52

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377694

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Elizabeth M Moore

Mailing Address 1223 Silver Sage Dr Apt 303

City: Raleigh State: NC Zip Code: 27606

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 10.00

**Transaction ID : fdd99dc4-33cc-4071-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Elizabeth M Moore

Mailing Address 1223 Silver Sage Dr Apt 303

City: Raleigh State: NC Zip Code: 27606

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 1.59

**Transaction ID : bb10b3bd-1246-454c-b**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 11.59

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377695

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gabriella E Hansen

Mailing Address 310 West Meath Drive

City: Winterville State: NC Zip Code: 28590

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 20.00

**Transaction ID : cfffcf3e-9df9-4bbf-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Gabriella E Hansen

Mailing Address 310 West Meath Drive

City: Winterville State: NC Zip Code: 28590

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 15.60

**Transaction ID : 69275e13-d7b7-4167-a**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 35.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377696

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Luke T Waltermire

Mailing Address 107 S Grist Mill Rd

City Hampstead | State NC | Zip Code 28443

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
27.00

**Transaction ID : e049d599-5fc5-40f1-8**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Luke T Waltermire

Mailing Address 107 S Grist Mill Rd

City Hampstead | State NC | Zip Code 28443

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
24.00

**Transaction ID : 7e6a892d-6c34-4731-9**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 51.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377697

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Matt Curran

Mailing Address 1537 Country Lane

City: Kernersville State: NC Zip Code: 27284

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 41.50

**Transaction ID : b2168e78-6b24-4b46-a**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Matt Curran

Mailing Address 1537 Country Lane

City: Kernersville State: NC Zip Code: 27284

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 16.50

**Transaction ID : 226024d9-2323-49dc-a**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 58.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377698

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City: Newport State: NC Zip Code: 28570

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 33.00

**Transaction ID : 4b1b95aa-44a0-4aa9-a**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City: Newport State: NC Zip Code: 28570

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 9.21

**Transaction ID : fde81496-4788-48ac-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 42.21

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377699

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Allie Butler

Mailing Address 1676 Shady Creek Rd

City: Ayden State: NC Zip Code: 28513

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 35.00

**Transaction ID : fd8bae38-5cc6-41ee-8**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Andrea L Hammond

Mailing Address 12920 Kneeland Ln

City: Neosho State: MO Zip Code: 64850

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 25.00

**Transaction ID : 142e1ba9-b2fc-4364-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 60.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377700

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Andrea L Hammond

Mailing Address 12920 Kneeland Ln

City Neosho State MO Zip Code 64850

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
31.80

**Transaction ID : 6b379f3d-d4ab-4cda-9**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Matt Gleb

Mailing Address 3815 Robin Road

City Ayden State NC Zip Code 28513

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
35.00

**Transaction ID : 6e03b64d-8319-422f-a**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 66.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377701

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on MM / DD / YYYY

Full Name of Payee
Matt Gleb

Mailing Address 3815 Robin Road

City: Ayden State: NC Zip Code: 28513

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 22.50

**Transaction ID : 5f48e9a2-06f5-47e5-a**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Sharon Lloyd

Mailing Address 4301 Lankford

City: Springdale State: AR Zip Code: 72762

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 50.00

**Transaction ID : e716e1a2-e3d2-428d-8**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 72.50

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377702

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Sharon Lloyd

Mailing Address 4301 Lankford

City: Springdale State: AR Zip Code: 72762

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 14.76

**Transaction ID : 2247f459-140a-4d76-b**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Amanda Boley

Mailing Address Split Oak Drive

City: charlotte State: NC Zip Code: 28227

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 55.00

**Transaction ID : 7fc2881f-ed3c-45e9-8**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 69.76

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377703

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amanda Boley

Mailing Address Split Oak Drive

City charlotte State NC Zip Code 28227

Purpose of Expenditure Mileage

Category/Type 002

Date of Public Distribution/Dissemination 08 / 07 / 2014

Amount 20.94

Transaction ID : a5b72313-ee1b-4b1a-b

Date of Disbursement or Obligation 08 / 07 / 2014

Name of Federal Candidate Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 554635.78

Disbursement For: ☐ Primary ☒ General 2014 ☐ Other (specify) ▶

Full Name of Payee
Antoinette Franklin

Mailing Address 8822 Apple St

City New Orleans State LA Zip Code 70188

Purpose of Expenditure Salary

Category/Type 001

Date of Public Distribution/Dissemination 08 / 07 / 2014

Amount 50.00

Transaction ID : 2634b996-1cc7-4e12-b

Date of Disbursement or Obligation 08 / 07 / 2014

Name of Federal Candidate Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 554635.78

Disbursement For: ☐ Primary ☒ General 2014 ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 70.94

(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.

*Ms. Emily Buchanan* *[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377704

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Antoinette Franklin

Mailing Address 8822 Apple St

City: New Orleans State: LA Zip Code: 70188

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 50.00

**Transaction ID : 0d55990a-f8e5-45ed-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 80.00

**Transaction ID : f148f6dd-2928-4da8-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 130.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377705

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 12.00

**Transaction ID : 3d184f9b-a831-484c-b**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City: Spindale State: NC Zip Code: 28160

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 90.00

**Transaction ID : 1fdb15e6-09ef-4597-8**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 102.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377706

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City: Spindale State: NC Zip Code: 28160

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 9.99

**Transaction ID : 5c17f6ce-42d6-4534-b**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Pollreis

Mailing Address 15.5 Magnolia Circle

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 10.00

**Transaction ID : 13356b82-ecc9-4932-8**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 19.99

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377707

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Pollreis

Mailing Address 15.5 Magnolia Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
0.90

**Transaction ID : 7eece85b-0c95-41b7-8**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City Metaire | State LA | Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
15.00

**Transaction ID : 22908c37-6afb-4cda-b**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 15.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 2.10

**Transaction ID : 7f412224-31b9-4460-b**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 40.00

**Transaction ID : 6a14aaf0-f770-4b7e-8**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 42.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377709

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 12.60

**Transaction ID : c0cf58e0-2a5c-4851-a**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Xavier Miller

Mailing Address 407 randall Dr

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 10.00

**Transaction ID : 13674cd9-cab2-409b-b**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 22.60

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377710

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kassidy L Tyer

Mailing Address 41 Hawk Hollow Trail

City: Burgaw State: NC Zip Code: 28425

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 35.00

**Transaction ID : b2e3534f-6ea2-4e65-8**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kassidy L Tyer

Mailing Address 41 Hawk Hollow Trail

City: Burgaw State: NC Zip Code: 28425

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 15.00

**Transaction ID : 004af4f7-7b67-47d2-b**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 50.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377711

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Billy Martin

Mailing Address 250 JS Brewton rd

City goldonna State LA Zip Code 71031

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
60.00

**Transaction ID : bb4fa9a2-28e6-49f0-a**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Billy Martin

Mailing Address 250 JS Brewton rd

City goldonna State LA Zip Code 71031

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
6.90

**Transaction ID : 93dc8099-ddc9-4d8b-8**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 66.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jenna M Ledford

Mailing Address 2279 Gouges Creek Rd

City: Spruce Pine | State: NC | Zip Code: 28777

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 70.00

**Transaction ID : 9fe6bc38-407b-4f08-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jenna M Ledford

Mailing Address 2279 Gouges Creek Rd

City: Spruce Pine | State: NC | Zip Code: 28777

Purpose of Expenditure: Mileage | Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 26.49

**Transaction ID : 12641d33-4dbc-4b13-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 96.49

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377713

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Andrea Melton

Mailing Address 4015 Village Place

City Winston-Salem State NC Zip Code 27127

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
20.00

**Transaction ID : a12db300-d124-4082-9**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Andrea Melton

Mailing Address 4015 Village Place

City Winston-Salem State NC Zip Code 27127

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
9.90

**Transaction ID : 276664ae-5514-42e9-9**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 29.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377714

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Felice Barrett

Mailing Address 1588 Asbury

City: Springdale State: AR Zip Code: 72762

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 50.00

**Transaction ID : 0018ed2b-308a-430c-8**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Felice Barrett

Mailing Address 1588 Asbury

City: Springdale State: AR Zip Code: 72762

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 3.00

**Transaction ID : 87c0fc29-62c2-41d4-b**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 53.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377715

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Aaron Credeur

Mailing Address 234 East Musique Rd

City: Carencro State: LA Zip Code: 70520

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 40.00

**Transaction ID : 3bac482f-ef0c-49b3-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Aaron Credeur

Mailing Address 234 East Musique Rd

City: Carencro State: LA Zip Code: 70520

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 9.90

**Transaction ID : 3efd38b0-2d6d-434a-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 49.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377716

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 10.00

**Transaction ID : 2845a945-fbce-4bc1-a**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 3.78

**Transaction ID : b0bebbbc-b62c-4268-a**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 13.78

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377717

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Marysol Netro

Mailing Address 312 S Gunter St

City Siloam Springs | State AR | Zip Code 72761

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
50.00

**Transaction ID : 2e03cb92-4f6e-476c-a**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Marysol Netro

Mailing Address 312 S Gunter St

City Siloam Springs | State AR | Zip Code 72761

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
5.10

**Transaction ID : 6afa353a-43f6-44bd-8**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 55.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 90.00

**Transaction ID : e169d79d-d0a7-4e17-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 28.50

**Transaction ID : cdac9ce8-03d4-4c64-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 118.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377719

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
70.00

**Transaction ID : 29695742-5cb5-440e-b**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
20.10

**Transaction ID : 9b56649a-3413-426e-b**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 90.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377720

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
40.00

**Transaction ID : 57a8d67b-368d-4709-a**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
16.50

**Transaction ID : de385409-6067-4bd9-a**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 56.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377721

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 90.00

**Transaction ID : ce33b49d-5820-48b2-b**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 28.50

**Transaction ID : b81f3024-d97b-4bf9-a**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 118.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377722

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Trent C Oelschlaeger

Mailing Address 18710 Strawberry Plant Road

City: Fayetteville State: AR Zip Code: 72704

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 30.00

**Transaction ID : 3bb12258-4ee7-4682-a**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Trent C Oelschlaeger

Mailing Address 18710 Strawberry Plant Road

City: Fayetteville State: AR Zip Code: 72704

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 17.10

**Transaction ID : a429800f-9e56-46a5-b**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 47.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377723

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Theresa A Touchet

Mailing Address 102 French Street #3

City: New Orleans State: LA Zip Code: 70124

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 30.00

**Transaction ID : 83a66d37-dab7-4cd3-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Theresa A Touchet

Mailing Address 102 French Street #3

City: New Orleans State: LA Zip Code: 70124

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 0.90

**Transaction ID : e20e47b5-2794-43dc-b**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 30.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377724

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Jean

Mailing Address 2012 Harrison Ave

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 90.00

**Transaction ID : 7299e2f0-6b4f-4e19-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Steven Jean

Mailing Address 2012 Harrison Ave

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 12.00

**Transaction ID : c13f06ea-af47-4695-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 102.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377725

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jodi Fountain

Mailing Address 1010 S Dogwood Drive

City: Bogalusa State: LA Zip Code: 70427

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 25.00

**Transaction ID : 22480296-0dfd-4afc-a**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James Tatro

Mailing Address 1208 Braeburn Rd

City: Charlotte State: NC Zip Code: 28211

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 60.00

**Transaction ID : cd21c9e9-01ac-481d-8**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 85.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377726

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Tatro

Mailing Address 1208 Braeburn Rd

City Charlotte | State NC | Zip Code 28211

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
6.30

**Transaction ID : 4ebfeb92-e183-410b-b**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City Shelby | State NC | Zip Code 28152

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
60.00

**Transaction ID : 8ddc7949-c453-4715-a**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 66.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City: Shelby State: NC Zip Code: 28152

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 28.80

**Transaction ID : c3305795-77e4-41ec-8**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Laura U Logie

Mailing Address 2565 Shire Circle

City: Harrisonburg State: VA Zip Code: 22801

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 30.00

**Transaction ID : 6989d8e8-a7a2-49f1-a**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 58.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Chassidy Menard

Mailing Address 515 Walter Dr.

City: Lafayette State: LA Zip Code: 70507

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 110.00

**Transaction ID : 9cc94393-5b3c-4806-a**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Chassidy Menard

Mailing Address 515 Walter Dr.

City: Lafayette State: LA Zip Code: 70507

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 14.10

**Transaction ID : 7235a49f-c0cd-41bc-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 124.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377729

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 80.00

**Transaction ID : 75f16584-ade3-4215-b**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 80.00

**Transaction ID : ba8cca9c-7140-4344-8**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 160.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377730

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney D Culbreth

Date of Public Distribution/Dissemination
08 / 07 / 2014

Mailing Address
100 Asbury CT
3200 Dam Neck Rd

Amount
80.00

City: Winchester
State: VA
Zip Code: 22602

**Transaction ID : 549a8ffa-8e90-4801-9**

Purpose of Expenditure
Salary

Category/Type: 001

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rze Culbreath

Date of Public Distribution/Dissemination
08 / 07 / 2014

Mailing Address
100 Asbury Ct

Amount
70.00

City: Winchester
State: VA
Zip Code: 22602

**Transaction ID : d1d5d39c-b454-41d0-8**

Purpose of Expenditure
Salary

Category/Type: 001

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 150.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377731

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 40.00

**Transaction ID : ad16642b-66ba-4a67-8**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 60.00

**Transaction ID : 419e3043-5a15-4758-8**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 100.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 7.80

**Transaction ID : f2796449-ef0e-4910-b**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 67.50

**Transaction ID : 03760ab2-8cb8-4a33-8**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 75.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377733

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 21.60

**Transaction ID : 191a1225-42a2-406b-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 100.00

**Transaction ID : c17897fa-2eed-4e77-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 121.60

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
24.60

**Transaction ID : cbea6e44-25c5-4dbf-b**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City Eden State NC Zip Code 27288

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
100.00

**Transaction ID : 42aaadfc-c362-4801-b**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 124.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377735

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 12.60

**Transaction ID : 07e959f9-1919-482b-a**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 25.00

**Transaction ID : 614c9c67-cca0-43eb-8**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 37.60

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377736

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 8.70

**Transaction ID : b2900959-47ff-440d-a**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 30.00

**Transaction ID : 7f31b203-21e3-4b52-a**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 38.70

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377737

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 2.01

**Transaction ID : 75483f48-1f35-4ea5-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 60.00

**Transaction ID : 9c7a97df-f553-46dc-8**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 62.01

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377738

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
25.20

**Transaction ID : 9e49ab21-e0de-4405-b**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Beverly Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
60.00

**Transaction ID : 6c955ae4-19bf-493c-8**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 85.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
45.00

**Transaction ID : cbe2224c-1ab9-4d2c-b**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
0.60

**Transaction ID : 1252f1fb-00cb-467c-b**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 45.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377740

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Dylan Simon

Mailing Address 111 Millrock Drive

City Lafayette | State LA | Zip Code 70508

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
29.67

**Transaction ID : d4702881-9ae9-4181-8**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Dylan Simon

Mailing Address 111 Millrock Drive

City Lafayette | State LA | Zip Code 70508

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
6.87

**Transaction ID : 116d3ebb-a6fd-4fb8-b**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 36.54

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377741

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 90.00

**Transaction ID : 6194ddce-66a4-47a2-a**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 30.60

**Transaction ID : 5cca8e9f-61c7-48f7-a**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 120.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377742

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francesca Blom

Mailing Address 101 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 90.00

**Transaction ID : 081d9552-81bc-4bd2-8**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francesca Blom

Mailing Address 101 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 5.00

**Transaction ID : fc411716-a5dd-4280-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 95.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377743

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James W Blevins

Date of Public Distribution/Dissemination
08 / 07 / 2014

Mailing Address
108 East Clinton St
PO Box 410

Amount
40.00

City: Salemburg State: NC Zip Code: 28385

**Transaction ID : a18baa55-dd4a-4cbf-8**

Purpose of Expenditure
Salary

Category/Type 001

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
James W Blevins

Date of Public Distribution/Dissemination
08 / 07 / 2014

Mailing Address
108 East Clinton St
PO Box 410

Amount
9.06

City: Salemburg State: NC Zip Code: 28385

**Transaction ID : 86853747-0d34-48e7-9**

Purpose of Expenditure
Mileage

Category/Type 002

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 49.06

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377744

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Evelyn Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 50.00

**Transaction ID : d91b3bf4-993e-4d01-8**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Evelyn Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 6.90

**Transaction ID : 3717d6b1-d046-448b-b**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 56.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tarrin Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 70.00

**Transaction ID : 95defb82-727f-424a-a**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tarrin Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 6.90

**Transaction ID : 0b8fdbc2-c921-46db-a**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 76.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377746

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brandon Guttuso

Mailing Address 3013 Transcontinental Dr

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 70.00

**Transaction ID : 8c854f61-0049-4e34-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brandon Guttuso

Mailing Address 3013 Transcontinental Dr

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 6.90

**Transaction ID : 058811dc-5c0c-4754-b**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 76.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377747

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 45.00

**Transaction ID : 625f4397-d977-48df-b**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 4.50

**Transaction ID : a81981a3-a660-4954-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 49.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377748

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte | State: LA | Zip Code: 70586

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 60.00

**Transaction ID : 3b45cb6e-c814-410e-8**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte | State: LA | Zip Code: 70586

Purpose of Expenditure: Mileage | Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 34.80

**Transaction ID : c9bb6c3f-0ca4-4917-b**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 94.80

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377749

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carey T Henderson

Mailing Address 1025 Inverness Rd

City: Suthern Pines State: NC Zip Code: 28387

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 85.00

**Transaction ID : 689259c2-f075-43e4-9**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carey T Henderson

Mailing Address 1025 Inverness Rd

City: Suthern Pines State: NC Zip Code: 28387

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 16.80

**Transaction ID : a7f9aadf-febd-42df-b**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 101.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377750

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City: Sterling State: VA Zip Code: 20165

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 20.00

**Transaction ID : da2573a3-a96b-4613-a**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Morgan R Padgett

Mailing Address 2164 Kay Rd

City: Greenville State: NC Zip Code: 27858

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 20.00

**Transaction ID : 400a0608-ea05-4c2f-8**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 40.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
50.00

**Transaction ID : eafd647c-e752-4831-9**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 07 / 2014

Amount
18.90

**Transaction ID : 0e9adb6b-3096-4f99-8**

Date of Disbursement or Obligation
08 / 07 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 68.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gabriella E Hansen

Mailing Address 310 West Meath Drive

City: Winterville State: NC Zip Code: 28590

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 20.00

**Transaction ID : 4d33597a-822b-46c1-b**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Linda L Norris

Mailing Address 816 Center St

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 25.00

**Transaction ID : 598dde99-e51e-4c76-9**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 45.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Linda L Norris

Mailing Address 816 Center St

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 9.00

**Transaction ID : e903e7a2-033a-4ec7-8**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Adrian Dudley

Mailing Address 4367 Split Log Rd

City: Goodman State: MO Zip Code: 64843

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 150.00

**Transaction ID : aa44e270-8903-47de-8**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 159.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377754

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Adrian Dudley

Mailing Address 4367 Split Log Rd

City: Goodman State: MO Zip Code: 64843

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 18.00

**Transaction ID : dfd9d5b4-de27-4a1a-8**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Morgan R Padgett

Mailing Address 2164 Kay Rd

City: Greenville State: NC Zip Code: 27858

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 20.00

**Transaction ID : a5466d82-afb9-47d3-b**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 38.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377755

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Morgan R Padgett

Mailing Address 2164 Kay Rd

City: Greenville State: NC Zip Code: 27858

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 14.40

**Transaction ID : 6bdcd779-fedc-4fd1-b**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Luke T Waltermire

Mailing Address 107 S Grist Mill Rd

City: Hampstead State: NC Zip Code: 28443

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 28.00

**Transaction ID : 338012e7-c694-47af-9**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 42.40

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377756

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Luke T Waltermire

Mailing Address 107 S Grist Mill Rd

City: Hampstead State: NC Zip Code: 28443

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 28.50

**Transaction ID : 198d9034-8c69-4c9e-a**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Francesca Blom

Mailing Address 101 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 70.00

**Transaction ID : b23aaf06-f71e-41ad-9**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 98.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377757

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Andrea L Hammond

Mailing Address 12920 Kneeland Ln

City Neosho State MO Zip Code 64850

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
40.00

**Transaction ID : 5027a376-938d-43be-a**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Andrea L Hammond

Mailing Address 12920 Kneeland Ln

City Neosho State MO Zip Code 64850

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
28.20

**Transaction ID : bcd2a3bd-ecba-47b6-8**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 68.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377758

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Antoinette Franklin

Mailing Address 8822 Apple St

City: New Orleans State: LA Zip Code: 70188

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 55.00

**Transaction ID : 472ccb33-01d0-4632-b**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City: Spindale State: NC Zip Code: 28160

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 77.50

**Transaction ID : 969a2df1-2a44-4c23-b**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 132.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377759

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City: Spindale State: NC Zip Code: 28160

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 5.67

**Transaction ID : 08273056-f1cb-4622-a**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 40.00

**Transaction ID : 9957b233-ffa7-4286-b**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 45.67

**(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377760

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 7.05

**Transaction ID : f01c2281-f298-4471-9**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 85.00

**Transaction ID : 60d3159b-5b83-4e0e-a**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 92.05

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 13.50

**Transaction ID : 97796dc9-5d74-414a-a**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Amanda Boley

Mailing Address Split Oak Drive

City: charlotte State: NC Zip Code: 28227

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 52.50

**Transaction ID : c8dd3401-7b63-43b0-a**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 66.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951377762

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amanda Boley

Mailing Address
Split Oak Drive

City: charlotte
State: NC
Zip Code: 28227

Purpose of Expenditure
Mileage

Category/Type: 002

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
24.30

**Transaction ID : b7e1753c-9ba9-4188-8**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Donald Dessauer

Mailing Address
1804 Auburn Ave

City: Metaire
State: LA
Zip Code: 70003

Purpose of Expenditure
Salary

Category/Type: 001

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
20.00

**Transaction ID : 737801ae-c5b9-49f4-9**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 44.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 2.10

**Transaction ID : 46c5a367-6d1a-4b19-9**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City: Search State: AR Zip Code: 72149

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 20.00

**Transaction ID : 404b5051-6ae1-4232-a**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 22.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377764

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City: Search | State: AR | Zip Code: 72149

Purpose of Expenditure: Mileage | Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 3.00

**Transaction ID : b2826452-33e2-4e57-9**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Chassidy Menard

Mailing Address 515 Walter Dr.

City: Lafayette | State: LA | Zip Code: 70507

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 15.00

**Transaction ID : 36d5473d-c5f3-4870-8**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 18.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377765

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Chassidy Menard

Mailing Address 515 Walter Dr.

City: Lafayette State: LA Zip Code: 70507

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 7.50

**Transaction ID : e0ab42af-f60e-4579-8**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 30.00

**Transaction ID : c89188e4-cfd0-41b9-9**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 37.50

(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377766

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 26.40

**Transaction ID : 9f37082d-f9a7-4450-a**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City: Shreveport State: LA Zip Code: 71104

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 60.00

**Transaction ID : 2273893e-dd6e-467e-b**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 86.40

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377767

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
26.70

**Transaction ID : c59d4022-dae5-452f-8**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Karl L Starns

Mailing Address 4120 Bon Aire Dr
Apt 6307

City Monroe State LA Zip Code 71212

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
60.00

**Transaction ID : 92c9c499-c67d-41ad-9**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 86.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377768

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Karl L Starns

Mailing Address
4120 Bon Aire Dr
Apt 6307

City: Monroe State: LA Zip Code: 71212

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 84.00

**Transaction ID : 4654eb1b-0f6e-458b-b**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Barbara A Williams

Mailing Address
3002 Darden Rd
Apt A

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 100.00

**Transaction ID : ff0c9914-8dab-4c94-b**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 184.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377769

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City Shelby | State NC | Zip Code 28152

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
33.00

**Transaction ID : fa70e06c-5eed-422c-9**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City Shelby | State NC | Zip Code 28152

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
29.10

**Transaction ID : 4a720b4e-b549-41f1-9**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 62.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377770

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City Newport | State NC | Zip Code 28570

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
40.00

**Transaction ID : 46a429e9-ab95-41d8-9**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City Newport | State NC | Zip Code 28570

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
9.84

**Transaction ID : 4e729ad7-b4ff-4b47-b**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 49.84

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377771

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City Wilmington State NC Zip Code 28405

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
60.00

**Transaction ID : af993227-7d57-47da-b**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City Wilmington State NC Zip Code 28405

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
14.70

**Transaction ID : f499e8ac-22ce-4e91-8**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 74.70

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377772

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
100.00

**Transaction ID : 49370adc-3b3f-4539-8**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
18.00

**Transaction ID : 3d7d3c79-3067-4cf5-8**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 118.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377773

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Cari A Stevenson

Mailing Address 12312 Summer Cemetary Rd

City: Cabot State: AR Zip Code: 72023

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 20.00

**Transaction ID : 479738e1-2264-4362-b**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 60.00

**Transaction ID : fa290248-dda5-4104-8**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 80.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377774

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 27.21

**Transaction ID : b4381fa4-6627-4cbf-9**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 25.00

**Transaction ID : 962d33e8-a2aa-42f3-b**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 52.21

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377775

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 12.84

**Transaction ID : d067160d-df06-4ddd-9**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James Tatro

Mailing Address 1208 Braeburn Rd

City: Charlotte State: NC Zip Code: 28211

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 80.00

**Transaction ID : 985f647f-2cb1-46c4-b**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 92.84

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377776

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Tatro

Date of Public Distribution/Dissemination
08 / 08 / 2014

Mailing Address 1208 Braeburn Rd

Amount
7.20

City: Charlotte State: NC Zip Code: 28211

**Transaction ID : 8fd10296-0c61-4fce-b**

Purpose of Expenditure
Mileage

Category/Type 002

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Patrice Wolfe

Date of Public Distribution/Dissemination
08 / 08 / 2014

Mailing Address 9909 Treasure Hill Rd

Amount
25.00

City: Little Rock State: AR Zip Code: 72205

**Transaction ID : 897fe4f5-5fc5-446c-a**

Purpose of Expenditure
Salary

Category/Type 001

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 32.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 3.60

**Transaction ID : af30f065-2a2c-4350-9**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Marysol Netro

Mailing Address 312 S Gunter St

City: Siloam Springs State: AR Zip Code: 72761

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 30.00

**Transaction ID : ec107ed9-c511-4b12-a**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 33.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Marysol Netro

Mailing Address 312 S Gunter St

City: Siloam Springs State: AR Zip Code: 72761

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 1.50

**Transaction ID : bb2e7c6c-cd70-4f8a-a**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carey T Henderson

Mailing Address 1025 Inverness Rd

City: Suthern Pines State: NC Zip Code: 28387

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 85.00

**Transaction ID : e6866021-78fe-4429-9**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 86.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377779

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carey T Henderson

Mailing Address 1025 Inverness Rd

City: Suthern Pines State: NC Zip Code: 28387

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 14.10

**Transaction ID : c8c76475-ca46-43fe-8**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shelby J Davis

Mailing Address 6414 The Divide Pkwy
Apt 204

City: Little Rock State: AR Zip Code: 72223

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 40.00

**Transaction ID : 68607ecb-528f-44b0-9**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 54.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shelby J Davis

Mailing Address
6414 The Divide Pkwy
Apt 204

City: Little Rock
State: AR
Zip Code: 72223

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 6.90

**Transaction ID : 2d69dbd9-feb4-4416-8**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Diane Smith

Mailing Address
4006 Wolkswalk Place

City: Raleigh
State: NC
Zip Code: 27610

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 30.00

**Transaction ID : a81b3bd4-7654-4f5b-b**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 36.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377781

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City Raleigh | State NC | Zip Code 27610

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
8.10

**Transaction ID : f120bf49-d695-478e-a**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City Sterling | State VA | Zip Code 20165

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
70.00

**Transaction ID : 994f084a-c9a8-4037-b**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 78.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377782

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brandy Starns

Mailing Address 300 Evangeline St

City: Monroe State: LA Zip Code: 71201

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 60.00

**Transaction ID : 4e0f3ead-ca66-4549-8**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brandy Starns

Mailing Address 300 Evangeline St

City: Monroe State: LA Zip Code: 71201

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 87.00

**Transaction ID : 5999cead-988d-4e85-9**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 147.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377783

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ky Broussard

Mailing Address 301 N Cedar Street

City Abbeville State LA Zip Code 70510

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
25.00

**Transaction ID : bf4fcea2-848e-4d1b-b**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ky Broussard

Mailing Address 301 N Cedar Street

City Abbeville State LA Zip Code 70510

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
10.50

**Transaction ID : 448b0fad-d150-4b97-8**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 35.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377784

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
27.50

**Transaction ID : 798f96fb-2ca3-42ef-a**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
24.81

**Transaction ID : 4c29503a-58d4-438c-8**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 52.31

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Vonniqua Jackson

Mailing Address
111 Westchester Blvd
Apt D4

City: Slidell State: LA Zip Code: 70458

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 50.00

**Transaction ID : 6517ce9c-42cd-4c46-a**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eric J Smith

Mailing Address
4967 Dysartville

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 80.00

**Transaction ID : 67eb45bc-b812-4e9f-9**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 130.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377786

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 80.00

**Transaction ID : ee167607-b458-4d96-8**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 9.00

**Transaction ID : 44750a52-eb27-42ed-b**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377787

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
30.00

**Transaction ID : e3ef5bb9-25ce-4ed2-b**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
15.00

**Transaction ID : 72970b3f-a843-4604-9**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 45.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377788

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City Lafayette | State LA | Zip Code 70503

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
39.00

**Transaction ID : e683d3ee-4894-45a6-b**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City Lafayette | State LA | Zip Code 70503

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
3.06

**Transaction ID : 5c4320d3-1df4-4bb9-8**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 42.06

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377789

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Earl Stewart

Mailing Address 9455 Snow Camp Road

City: Snowcamp State: NC Zip Code: 27349

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 85.00

**Transaction ID : 2213ea78-3086-4eba-8**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Earl Stewart

Mailing Address 9455 Snow Camp Road

City: Snowcamp State: NC Zip Code: 27349

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 3.00

**Transaction ID : 8a8c01d9-738f-4b9d-9**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 88.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377790

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 60.00

**Transaction ID : 1dfcfa84-1f31-4e9b-9**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 27.21

**Transaction ID : cbb3f1da-6786-4d16-8**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 87.21

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377791

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David M Bozeman

Mailing Address 768 Pine Haven Drive

City Fayetteville | State NC | Zip Code 28306

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
20.00

**Transaction ID : 3470fd51-f06f-4ee9-9**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
David M Bozeman

Mailing Address 768 Pine Haven Drive

City Fayetteville | State NC | Zip Code 28306

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
0.90

**Transaction ID : 01f02959-0a36-4927-b**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 20.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377792

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 80.00

**Transaction ID : 8f63964c-9299-4733-b**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joseph P Thierfelder
Previously filed under the name Pthierfelder

Mailing Address 2411 Armstrong

City: Gastonia State: NC Zip Code: 28054

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 85.00

**Transaction ID : 0b42f952-e183-47b3-9**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 165.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377793

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joseph P Thierfelder
Previously filed under the name Pthierfelder

Mailing Address 2411 Armstrong

City Gastonia State NC Zip Code 28054

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
6.00

**Transaction ID : 6259b86b-74cd-41ff-9**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City Winchester State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
80.00

**Transaction ID : 769e3884-ed0f-489f-b**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 86.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377794

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney D Culbreth

Date of Public Distribution/Dissemination
08 / 08 / 2014

Mailing Address
100 Asbury CT
3200 Dam Neck Rd

Amount
80.00

City: Winchester
State: VA
Zip Code: 22602

**Transaction ID : e18b4cbd-33b4-4001-b**

Purpose of Expenditure
Salary

Category/Type: 001

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rze Culbreath

Date of Public Distribution/Dissemination
08 / 08 / 2014

Mailing Address
100 Asbury Ct

Amount
80.00

City: Winchester
State: VA
Zip Code: 22602

**Transaction ID : e73b5d1d-e08f-4c25-8**

Purpose of Expenditure
Salary

Category/Type: 001

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 160.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 50.00

**Transaction ID : 1941abbb-eb7a-494d-8**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 60.00

**Transaction ID : 62a7cc99-8f03-4007-a**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 110.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377796

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 13.20

**Transaction ID : b4b95cec-8ea9-4512-a**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 45.00

**Transaction ID : d594be98-24b9-4937-9**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 58.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 5.70

**Transaction ID : 0e025136-c7f4-48e5-b**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 60.00

**Transaction ID : 365dc8b0-c908-44fe-b**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 65.70

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377798

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 27.21

**Transaction ID : f5624ccc-14d1-4b6e-8**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 55.00

**Transaction ID : bdfe3a42-a3bb-48d0-a**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 82.21

**(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.

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951377799

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 28.20

**Transaction ID : 6f2dde54-7d21-4489-9**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Aaron Credeur

Mailing Address 234 East Musique Rd

City: Carencro State: LA Zip Code: 70520

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 35.00

**Transaction ID : 06dac511-7796-4c94-9**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 63.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377800

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Aaron Credeur

Mailing Address 234 East Musique Rd

City: Carencro State: LA Zip Code: 70520

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 9.00

**Transaction ID : c66a4474-df74-450b-a**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Benjamin Hernandez

Mailing Address 915 E Market Ave

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 50.00

**Transaction ID : 9db779d0-40e2-47cf-b**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 59.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377801

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Benjamin Hernandez

Mailing Address 915 E Market Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
12.30

**Transaction ID : f20ef8c0-306e-4a57-a**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro | State NC | Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
105.00

**Transaction ID : 1be2fcaf-e27b-478a-9**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 117.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377802

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
25.20

**Transaction ID : 118f40db-07f1-4f0a-8**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City Kenner State LA Zip Code 70065

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 08 / 2014

Amount
20.00

**Transaction ID : e7e15e2e-4318-4f62-8**

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 45.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377803

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City: Kenner State: LA Zip Code: 70065

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 4.92

**Transaction ID : 343b86bb-2fbf-4afd-a**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kassidy L Tyer

Mailing Address 41 Hawk Hollow Trail

City: Burgaw State: NC Zip Code: 28425

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 15.00

**Transaction ID : d87c39c8-b252-42b5-b**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 19.92

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377804

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kassidy L Tyer

Mailing Address 41 Hawk Hollow Trail

City: Burgaw State: NC Zip Code: 28425

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 6.00

**Transaction ID : a1d80e47-dd6d-4935-8**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought: 1095959.94

Disbursement For: ☐ Primary ☒ General 2014 ☐ Other (specify) ▶

Full Name of Payee
Carey T Henderson

Mailing Address 1025 Inverness Rd

City: Suthern Pines State: NC Zip Code: 28387

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 30.00

**Transaction ID : 89b7ecce-535e-44be-a**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought: 1095959.94

Disbursement For: ☐ Primary ☒ General 2014 ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 36.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carey T Henderson

Mailing Address 1025 Inverness Rd

City: Suthern Pines State: NC Zip Code: 28387

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 6.30

**Transaction ID : c956b2df-7f84-4162-b**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Karl L Starns

Mailing Address 4120 Bon Aire Dr
Apt 6307

City: Monroe State: LA Zip Code: 71212

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 30.00

**Transaction ID : 39f2cfeb-0112-4cca-a**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 36.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377806

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Karl L Starns

Mailing Address
4120 Bon Aire Dr
Apt 6307

City: Monroe
State: LA
Zip Code: 71212

Purpose of Expenditure
Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 15.00

**Transaction ID : 7f6ce995-6574-4db8-a**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Brandy Starns

Mailing Address
300 Evangeline St

City: Monroe
State: LA
Zip Code: 71201

Purpose of Expenditure
Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 45.00

**Transaction ID : c6df170b-f0c9-492c-a**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 60.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377807

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brandy Starns

Mailing Address 300 Evangeline St

City Monroe State LA Zip Code 71201

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
24.00

**Transaction ID : 927d92e3-ecbc-4a95-b**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Shantal C Culbreath

Mailing Address 4691 Hercules Lane

City Woodbridge State VA Zip Code 22193

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
40.00

**Transaction ID : 43bc8e49-1133-4864-a**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 64.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377808

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Trent C Oelschlaeger

Mailing Address 18710 Strawberry Plant Road

City: Fayetteville State: AR Zip Code: 72704

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 6.00

**Transaction ID : 8c69e4aa-29c8-4eb7-8**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Trent C Oelschlaeger

Mailing Address 18710 Strawberry Plant Road

City: Fayetteville State: AR Zip Code: 72704

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 4.50

**Transaction ID : bf359c1d-c229-4643-b**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 10.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377809

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 40.00

**Transaction ID : 5d2feac9-b57e-45fa-b**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 32.10

**Transaction ID : 6d1d821e-4e47-4681-b**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 72.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377810

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City: Wilmington State: NC Zip Code: 28405

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 40.00

**Transaction ID : e8ca48d5-cd04-487a-9**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City: Wilmington State: NC Zip Code: 28405

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 12.90

**Transaction ID : a750cf9e-56f0-4433-a**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 52.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Warren Gravois

Mailing Address 16005 7th St

City: Pearlington State: MS Zip Code: 39572

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 42.50

**Transaction ID : a2d2b038-0842-485c-a**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Warren Gravois

Mailing Address 16005 7th St

City: Pearlington State: MS Zip Code: 39572

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 3.54

**Transaction ID : e2d6b316-7e53-4d0a-b**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 46.04

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377812

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jonathan Odette

Mailing Address 9600 Earpsboro Chamblee Road

City: Wendell State: NC Zip Code: 27591

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 40.00

**Transaction ID : 08e298cd-8635-4bdb-b**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jonathan Odette

Mailing Address 9600 Earpsboro Chamblee Road

City: Wendell State: NC Zip Code: 27591

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 10.20

**Transaction ID : 514afd80-c126-42c0-b**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 50.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377813

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Cari A Stevenson

Mailing Address 12312 Summer Cemetary Rd

City: Cabot State: AR Zip Code: 72023

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 40.00

**Transaction ID : 10557b83-ec1a-43e1-b**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Cari A Stevenson

Mailing Address 12312 Summer Cemetary Rd

City: Cabot State: AR Zip Code: 72023

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 3.60

**Transaction ID : 53599acf-298c-4525-9**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 43.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377814

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 50.00

**Transaction ID : aa2dabc8-d38e-4092-9**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 8.40

**Transaction ID : 240a7263-2fed-4696-9**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 58.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377815

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Parker H Morrow

Mailing Address 506 N Horton Street

City Searcy State AR Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
40.00

**Transaction ID : 677668ad-769f-413a-9**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Parker H Morrow

Mailing Address 506 N Horton Street

City Searcy State AR Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
22.50

**Transaction ID : 4872503d-69f7-4c13-b**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 62.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377816

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shantal C Culbreath

Mailing Address 4691 Hercules Lane

City: Woodbridge State: VA Zip Code: 22193

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 30.00

**Transaction ID : e0e53edc-d14a-492e-b**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Peter Sahuc

Mailing Address 107 Phillip Ave

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 85.00

**Transaction ID : 92e2ff6a-d52f-43b6-a**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 115.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377817

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Peter Sahuc

Mailing Address 107 Phillip Ave

City Lafayette | State LA | Zip Code 70503

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
11.49

**Transaction ID : 944a2fd5-1fc4-47d2-9**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport | State LA | Zip Code 71119

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
80.00

**Transaction ID : 508173a4-7885-4b2d-a**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 91.49

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377818

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport | State LA | Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
22.80

**Transaction ID : 4a3c7a2a-7297-4f82-8**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Corey Miller

Mailing Address 8617 Riley Hills Rd

City Zebulon | State NC | Zip Code 27597

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
40.00

**Transaction ID : 2730c723-5093-46b2-b**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 62.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377819

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Corey Miller

Mailing Address 8617 Riley Hills Rd

City Zebulon | State NC | Zip Code 27597

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
18.00

**Transaction ID : 07a1295b-6f33-4fde-9**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro | State NC | Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
40.00

**Transaction ID : 4191cfcc-3916-405b-9**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 58.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377820

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
17.10

**Transaction ID : 67032a35-2bd2-4bde-a**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City North Little rock State AR Zip Code 72116

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
45.00

**Transaction ID : cb50b0c9-a71a-42e4-a**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 62.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377821

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 12.69

**Transaction ID : 2a929b1b-13b3-41d1-a**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City: Shreveport State: LA Zip Code: 71104

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 50.00

**Transaction ID : fd4c0e20-3e83-455e-9**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 62.69

**(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377822

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
12.60

**Transaction ID : 94e637d3-30e9-4a86-8**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City Lafayette State LA Zip Code 70503

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
30.00

**Transaction ID : 4f0464d4-306b-4b32-9**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 42.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377823

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 2.34

**Transaction ID : 8be22073-6744-4e49-8**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City: Search State: AR Zip Code: 72149

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 30.00

**Transaction ID : 57417156-25c2-4176-9**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 32.34

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377824

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City: Search | State: AR | Zip Code: 72149

Purpose of Expenditure: Mileage | Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 3.00

**Transaction ID : 2cbbd672-6099-46df-8**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kay Davis

Mailing Address 5117 Carr Dr

City: Grifton | State: NC | Zip Code: 28530

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 45.00

**Transaction ID : 4718e493-15fd-4917-9**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 48.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377825

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kay Davis

Mailing Address 5117 Carr Dr

City: Grifton State: NC Zip Code: 28530

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 6.00

**Transaction ID : 8894ff28-68df-41d4-8**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City: METAIRIE State: LA Zip Code: 70003

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 70.00

**Transaction ID : 99621d44-076f-455d-a**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 76.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377826

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
1.20

**Transaction ID : 7fa47fdb-a758-4bb3-9**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Marysol Netro

Mailing Address 312 S Gunter St

City Siloam Springs State AR Zip Code 72761

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
120.00

**Transaction ID : 137984f3-9065-4da8-b**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 121.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377827

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Marysol Netro

Mailing Address 312 S Gunter St

City: Siloam Springs State: AR Zip Code: 72761

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 6.00

**Transaction ID : 6542e8e2-b0e1-49ef-a**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought: 292370.62

Disbursement For: ☐ Primary ☒ General 2014 ☐ Other (specify) ▶

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 20.00

**Transaction ID : fa6d9b66-8f22-47c2-a**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought: 292370.62

Disbursement For: ☐ Primary ☒ General 2014 ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 26.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377828

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 2.40

**Transaction ID : 3edc383b-0f4c-480d-9**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eric J Smith

Mailing Address 4967 Dysartville

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 80.00

**Transaction ID : 28b29117-692b-408b-b**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 82.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377829

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 80.00

**Transaction ID : 46efc9d5-5bd0-4adb-b**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 9.00

**Transaction ID : 17650d01-2d76-48dd-8**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377830

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Najib Mahmud

Mailing Address 3432 Riverrock Ct

City: Baton Rouge State: LA Zip Code: 70820

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 60.00

**Transaction ID : 8ffe0c4e-e50e-44fc-9**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Najib Mahmud

Mailing Address 3432 Riverrock Ct

City: Baton Rouge State: LA Zip Code: 70820

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 5.40

**Transaction ID : 988b3b1e-0d28-43c6-8**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 65.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377831

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
80.00

**Transaction ID : 7253ec3f-365f-4c17-b**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
18.00

**Transaction ID : 13c5846b-e718-4b49-b**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 98.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377832

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City Saltville State VA Zip Code 24370

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
80.00

**Transaction ID : abbf5086-8588-4f68-b**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City Saltville State VA Zip Code 24370

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
27.00

**Transaction ID : c1030161-a7cc-488f-a**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 107.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377833

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Beverly Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
80.00

**Transaction ID : d1161a61-af0a-4d5f-9**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Benjamin Hernandez

Mailing Address 915 E Market Ave

City Searcy State AR Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
50.00

**Transaction ID : 4111424c-a3f8-4d81-8**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 130.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377834

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Benjamin Hernandez

Mailing Address 915 E Market Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
8.10

**Transaction ID : e895a1aa-d07c-4d89-8**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City Sterling | State VA | Zip Code 20165

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
20.00

**Transaction ID : b368ca99-04b1-4b60-a**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 28.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377835

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 50.00

**Transaction ID : 14fb066c-d687-4879-8**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 10.20

**Transaction ID : e3f7d01f-aff0-4669-8**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 60.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377836

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Miller

Date of Public Distribution/Dissemination
08 / 08 / 2014

Mailing Address 718 Azalea Dr.
Unit 453

Amount
15.00

City: Hampstead State: NC Zip Code: 28443

**Transaction ID : 4323be10-4433-4478-9**

Purpose of Expenditure
Salary

Category/Type 001

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lisa Miller

Date of Public Distribution/Dissemination
08 / 08 / 2014

Mailing Address 718 Azalea Dr.
Unit 453

Amount
3.60

City: Hampstead State: NC Zip Code: 28443

**Transaction ID : e449fa09-aad9-4236-b**

Purpose of Expenditure
Mileage

Category/Type 002

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 18.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377837

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 25.00

**Transaction ID : 4687f32b-9147-4d0c-a**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 7.80

**Transaction ID : a3687137-0167-4a8f-9**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 32.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377838

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Reagan Brackett

Mailing Address 502 E Center Ave

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 10 / 2014

Amount
30.00

**Transaction ID : ece893ce-060d-4b3a-8**

Date of Disbursement or Obligation
08 / 10 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Reagan Brackett

Mailing Address 502 E Center Ave

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 10 / 2014

Amount
5.85

**Transaction ID : ce2aa7c5-22ac-4089-9**

Date of Disbursement or Obligation
08 / 10 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 35.85

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377839

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nathan Smith

Mailing Address 1247 W Mt Comfort Rd

City: Fayatteville State: AR Zip Code: 72703

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 20.00

**Transaction ID : 111f2ceb-5275-47b8-a**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nathan Smith

Mailing Address 1247 W Mt Comfort Rd

City: Fayatteville State: AR Zip Code: 72703

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 7.14

**Transaction ID : 67599e43-3a7f-4776-9**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 27.14

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377840

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Cari A Stevenson

Mailing Address 12312 Summer Cemetary Rd

City: Cabot State: AR Zip Code: 72023

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 40.00

**Transaction ID : 23d9e00b-f9f3-465d-8**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Cari A Stevenson

Mailing Address 12312 Summer Cemetary Rd

City: Cabot State: AR Zip Code: 72023

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 9.00

**Transaction ID : f6b26f2c-d763-462f-a**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 49.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City: Kenner State: LA Zip Code: 70065

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 40.00

**Transaction ID : 76713afd-7466-4a74-8**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City: Kenner State: LA Zip Code: 70065

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 8.25

**Transaction ID : 2051d500-f30f-4176-b**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 48.25

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377842

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Vonniqua Jackson

Mailing Address
111 Westchester Blvd
Apt D4

City: Slidell State: LA Zip Code: 70458

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 50.00

**Transaction ID : 1834e881-821a-4cfb-9**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address
205 Medallion Circle

City: Shreveport State: LA Zip Code: 71119

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 70.00

**Transaction ID : 826e5777-3827-4b2e-b**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 120.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 10 / 2014

Amount
19.80

**Transaction ID : a48aae2d-c6eb-4381-b**

Date of Disbursement or Obligation
08 / 10 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 10 / 2014

Amount
50.00

**Transaction ID : eb9d3442-1df1-4f2f-9**

Date of Disbursement or Obligation
08 / 10 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 69.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377844

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 10 / 2014

Amount
16.80

**Transaction ID : 681baa0b-fc33-455b-b**

Date of Disbursement or Obligation
08 / 10 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Courtney Goldstein

Mailing Address 1809 N Woodlawn

City Metairie State LA Zip Code 70001

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 10 / 2014

Amount
10.00

**Transaction ID : 63a9b098-f8d4-4d18-8**

Date of Disbursement or Obligation
08 / 10 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 26.80

**(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.

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951377845

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Courtney Goldstein

Mailing Address 1809 N Woodlawn

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 3.90

**Transaction ID : a073d2e9-e004-4223-b**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shelby J Davis

Mailing Address 6414 The Divide Pkwy
Apt 204

City: Little Rock State: AR Zip Code: 72223

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 45.00

**Transaction ID : d44cdaf4-7db9-42b7-9**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 48.90

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shelby J Davis

Mailing Address
6414 The Divide Pkwy
Apt 204

City: Little Rock
State: AR
Zip Code: 72223

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 11.40

**Transaction ID : a7547b12-1dab-4049-8**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eleanor McCoy

Mailing Address
4902 Catawba Dr

City: Greensboro
State: NC
Zip Code: 27407

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 90.00

**Transaction ID : 59d495e5-8768-4107-a**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 101.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377847

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 10 / 2014

Amount
23.70

**Transaction ID : 2290759e-2fc6-46ab-8**

Date of Disbursement or Obligation
08 / 10 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 10 / 2014

Amount
65.00

**Transaction ID : 5c137601-785c-4083-8**

Date of Disbursement or Obligation
08 / 10 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 88.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 10 / 2014

Amount
1.20

**Transaction ID : 652ce4e3-dcbd-4c24-8**

Date of Disbursement or Obligation
08 / 10 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Mr. Elizabeth Allison

Mailing Address 157 Bishop Drive

City Avondale State LA Zip Code 70094

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 10 / 2014

Amount
15.00

**Transaction ID : cc182c65-a85b-462a-8**

Date of Disbursement or Obligation
08 / 10 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 16.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377849

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Elizabeth Allison

Mailing Address 157 Bishop Drive

City: Avondale State: LA Zip Code: 70094

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 5.10

**Transaction ID : fbd760fa-0894-4248-8**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 85.00

**Transaction ID : 3a84f930-df4f-44f1-8**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 90.10

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377850

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 27.30

**Transaction ID : 2d51e564-642f-42c9-9**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 30.00

**Transaction ID : 9a3b1bc0-894f-413c-8**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 57.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 1.65

**Transaction ID : 8e6eb7aa-a48d-478f-b**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City: Search State: AR Zip Code: 72149

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 50.00

**Transaction ID : b42cfa5b-bcfa-4305-8**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 51.65

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City Search | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 10 / 2014

Amount
5.55

**Transaction ID : 73b0eb95-e3c2-4b02-8**

Date of Disbursement or Obligation
08 / 10 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City Search | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 10 / 2014

Amount
50.00

**Transaction ID : f5ecdfa6-d299-4534-9**

Date of Disbursement or Obligation
08 / 10 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 55.55

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377853

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City: Search State: AR Zip Code: 72149

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 5.55

**Transaction ID : 092fbb24-d935-4343-9**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brandon Guttuso

Mailing Address 3013 Transcontinental Dr

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 70.00

**Transaction ID : 4fbb7edd-1eea-49e8-a**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 75.55

(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377854

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brandon Guttuso

Mailing Address 3013 Transcontinental Dr

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 6.60

**Transaction ID : ce93e581-7099-4c4b-8**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Darius Beverly

Mailing Address 157 Bishop Drive

City: Avondale State: LA Zip Code: 70094

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 65.00

**Transaction ID : 81cc58fc-576e-4e3f-b**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 71.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377855

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Dinah Beverly

Mailing Address 157 Bishop Drive

City: Avondale State: LA Zip Code: 70064

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 65.00

**Transaction ID : 4a015723-f541-44ee-a**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Dinah Beverly

Mailing Address 157 Bishop Drive

City: Avondale State: LA Zip Code: 70064

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 5.40

**Transaction ID : 758ecc0e-3c6b-4af2-b**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 70.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377856

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Najib Mahmud

Mailing Address 3432 Riverrock Ct

City: Baton Rouge State: LA Zip Code: 70820

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 60.00

**Transaction ID : c79dcc96-ab64-4cb9-b**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Najib Mahmud

Mailing Address 3432 Riverrock Ct

City: Baton Rouge State: LA Zip Code: 70820

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 5.10

**Transaction ID : cccf3f54-e8f7-484a-b**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 65.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377857

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 90.00

**Transaction ID : 2657c1cc-d2d6-49b3-8**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 25.20

**Transaction ID : fa702744-4e7d-4123-b**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 115.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tarrin Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 70.00

**Transaction ID : 12e3edb7-f4de-4c6b-8**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Tarrin Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 6.00

**Transaction ID : eea2d490-854d-4dbe-a**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 76.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377859

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tarrin Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 70.00

**Transaction ID : 32c2c8ac-23bf-40eb-a**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tarrin Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 10 / 2014

Amount: 6.00

**Transaction ID : 963bcedb-f3c4-4052-b**

Date of Disbursement or Obligation: 08 / 10 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 76.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Parker H Morrow

Mailing Address 506 N Horton Street

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
40.00

**Transaction ID : 78c4c391-7162-4bea-b**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Parker H Morrow

Mailing Address 506 N Horton Street

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
22.50

**Transaction ID : 254f83eb-4bfc-403e-b**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 62.50

(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.

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951377861

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Reagan Brackett

Mailing Address 502 E Center Ave

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
30.00

**Transaction ID : d0e2899f-2867-4908-8**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Reagan Brackett

Mailing Address 502 E Center Ave

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 09 / 2014

Amount
7.86

**Transaction ID : 17bc7133-37cc-4150-a**

Date of Disbursement or Obligation
08 / 09 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 37.86

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377862

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Theresa a Youngblood

Mailing Address 102 S Main Street Apt A2

City: Berryville State: VA Zip Code: 22611

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 30.00

**Transaction ID : 303759ea-2cd7-4fc0-9**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Theresa a Youngblood

Mailing Address 102 S Main Street Apt A2

City: Berryville State: VA Zip Code: 22611

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 09 / 2014

Amount: 100.00

**Transaction ID : 18879cd2-6763-4c19-8**

Date of Disbursement or Obligation: 08 / 09 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 130.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377863

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gabriella E Hansen

Mailing Address 310 West Meath Drive

City Winterville | State NC | Zip Code 28590

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
20.00

**Transaction ID : 214227da-9c03-40d0-9**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Gabriella E Hansen

Mailing Address 310 West Meath Drive

City Winterville | State NC | Zip Code 28590

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
15.00

**Transaction ID : ead687f5-deed-474a-b**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 35.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
FP1 Strategies, LLC

Mailing Address P.O. Box 16504

City Alexandria State VA Zip Code 22302

Purpose of Expenditure
Web Video

Category/Type 004

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
15375.00

**Transaction ID : e42bdab4-61c2-4ea2-a**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Mr. Mark E Udall

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: CO

Calendar Year-To-Date Per Election for Office Sought 2014
25437.15

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
David M Bozeman

Mailing Address 768 Pine Haven Drive

City Fayetteville State NC Zip Code 28306

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
10.00

**Transaction ID : 6aa4386b-67cd-42b3-9**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 15385.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377865

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David M Bozeman

Mailing Address 768 Pine Haven Drive

City Fayetteville | State NC | Zip Code 28306

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
0.90

**Transaction ID : 7bc31726-b14a-4f9d-a**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City Charlotte | State NC | Zip Code 23215

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
25.00

**Transaction ID : e87b4893-69f1-4a68-a**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 25.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377866

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 9.60

**Transaction ID : 8b37e65e-e17e-4135-8**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Morgan R Padgett

Mailing Address 2164 Kay Rd

City: Greenville State: NC Zip Code: 27858

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 20.00

**Transaction ID : e7709b53-21fc-417f-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 29.60

(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377867

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Morgan E Hallenbeck

Mailing Address 3790 Christian Light Rd

City: Fuquay Varina State: NC Zip Code: 27526

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 50.00

**Transaction ID : 05495bcd-049d-46b1-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Morgan E Hallenbeck

Mailing Address 3790 Christian Light Rd

City: Fuquay Varina State: NC Zip Code: 27526

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 10.50

**Transaction ID : 2fdfcaf1-5722-4067-a**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 60.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nicole N Ball

Mailing Address 2528 Mill Creek Rd

City: Newport State: NC Zip Code: 28570

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 45.00

**Transaction ID : 5629aa47-e146-4ef2-8**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nicole N Ball

Mailing Address 2528 Mill Creek Rd

City: Newport State: NC Zip Code: 28570

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 13.50

**Transaction ID : 44d52ced-9305-482c-a**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 58.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377869

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City: Spindale State: NC Zip Code: 28160

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 32.50

**Transaction ID : 3d296046-0a1e-4822-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City: Spindale State: NC Zip Code: 28160

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 5.04

**Transaction ID : 9c78856d-f33b-4515-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 37.54

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377870

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 60.00

**Transaction ID : cf926dd1-34d5-4aa5-8**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 7.68

**Transaction ID : be384be4-48af-494b-8**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 67.68

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Corey Miller

Mailing Address 8617 Riley Hills Rd

City: Zebulon State: NC Zip Code: 27597

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 50.00

**Transaction ID : 42f3cedd-cba4-4991-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Corey Miller

Mailing Address 8617 Riley Hills Rd

City: Zebulon State: NC Zip Code: 27597

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 17.10

**Transaction ID : afa1dbd2-71df-46d8-8**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 67.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377872

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Laura U Logie

Mailing Address 2565 Shire Circle

City Harrisonburg State VA Zip Code 22801

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
30.00

**Transaction ID : 1447c240-01ef-4209-9**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Elizabeth M Moore

Mailing Address 1223 Silver Sage Dr Apt 303

City Raleigh State NC Zip Code 27606

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
12.50

**Transaction ID : 03363853-f72d-4f1a-a**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 42.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377873

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Elizabeth M Moore

Mailing Address 1223 Silver Sage Dr Apt 303

City Raleigh | State NC | Zip Code 27606

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
4.08

**Transaction ID : 475f1e83-86ea-4a6e-b**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City Raleigh | State NC | Zip Code 27604

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
45.00

**Transaction ID : b149f6ba-682a-4a06-a**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 49.08

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377874

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 5.10

**Transaction ID : 543b13e9-0f52-4f83-a**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Dwayne C Smith

Mailing Address 900 Bramblegate Rd

City: Hope Mills State: NC Zip Code: 28348

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 40.00

**Transaction ID : 8994f926-9c9c-4f40-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 45.10

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377875

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Dwayne C Smith

Mailing Address 900 Bramblegate Rd

City Hope Mills | State NC | Zip Code 28348

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
5.10

**Transaction ID : a6c25e93-c807-4e77-b**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jonathan Odette

Mailing Address 9600 Earpsboro Chamblee Road

City Wendell | State NC | Zip Code 27591

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
50.00

**Transaction ID : 5fe027e8-5a05-4c36-8**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 55.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jonathan Odette

Mailing Address 9600 Earpsboro Chamblee Road

City: Wendell State: NC Zip Code: 27591

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 28.20

**Transaction ID : 2c8b56c5-0709-4f05-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christine B Long

Mailing Address 3121 Charleycote Dr

City: Raleigh State: NC Zip Code: 27614

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 20.00

**Transaction ID : f560862a-1766-4880-a**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 48.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377877

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christine B Long

Mailing Address 3121 Charleycote Dr

City Raleigh State NC Zip Code 27614

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
9.72

**Transaction ID : 6bc44a41-58e8-434f-8**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City Raleigh State NC Zip Code 27604

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
75.00

**Transaction ID : 0b890b04-de5e-4779-b**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 84.72

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 6.60

**Transaction ID : ac1619b2-e905-4d3f-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James E Dacus

Mailing Address 117 Cynthia Ave

City: Farmington State: AR Zip Code: 72730

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 35.00

**Transaction ID : 74947d41-6553-4ec7-8**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 41.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377879

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James E Dacus

Mailing Address 117 Cynthia Ave

City: Farmington State: AR Zip Code: 72730

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 35.00

**Transaction ID : 5e43c1cf-b2cf-432d-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mr. Alex Peyton

Mailing Address 859 Hicks Rd

City: Washington State: LA Zip Code: 70589

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 80.00

**Transaction ID : 1e6a81b3-0570-4303-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 115.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377880

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Alex Peyton

Mailing Address 859 Hicks Rd

City: Washington State: LA Zip Code: 70589

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 45.00

**Transaction ID : 47a0ec89-17f1-4287-a**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Peter Sahuc

Mailing Address 107 Phillip Ave

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 35.00

**Transaction ID : 288652a7-43ce-4573-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 80.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Peter Sahuc

Mailing Address 107 Phillip Ave

City Lafayette | State LA | Zip Code 70503

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
8.28

**Transaction ID : 013f5a58-7ef2-4183-9**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Steven Jean

Mailing Address 2012 Harrison Ave

City Winston Salem | State NC | Zip Code 27105

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
100.00

**Transaction ID : 3db174d1-d977-41df-8**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 108.28

**(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.

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951377882

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Jean

Mailing Address 2012 Harrison Ave

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 16.50

**Transaction ID : 3a271215-7509-4ea2-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 15.00

**Transaction ID : 0b547f44-34e6-4c72-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 31.50

(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 2.10

**Transaction ID : f393c6b4-6f14-4c84-a**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 20.00

**Transaction ID : c114baca-aa84-44be-8**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 22.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377884

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 12.90

**Transaction ID : 70e79f15-43ba-417c-8**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 20.00

**Transaction ID : 9a18884a-6c23-4ec2-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 32.90

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377885

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 12.90

**Transaction ID : fcb6f93d-3347-4977-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shelby J Davis

Mailing Address 6414 The Divide Pkwy
Apt 204

City: Little Rock State: AR Zip Code: 72223

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 20.00

**Transaction ID : 33190a14-1125-4d04-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 32.90

**(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shelby J Davis

Mailing Address
6414 The Divide Pkwy
Apt 204

City: Little Rock
State: AR
Zip Code: 72223

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 4.50

**Transaction ID : 0472a80e-afaa-43a1-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Loretta D Nelsen

Mailing Address
5453 Wyandotte Dr

City: Hope Mills
State: NC
Zip Code: 28348

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 10.00

**Transaction ID : 3d03cfee-95eb-4be7-a**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 14.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377887

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jacob S Mann

Mailing Address 3875 Old Stage Rd S

City: Erwin State: NC Zip Code: 28339

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 80.00

**Transaction ID : aaee82be-ed27-4b0f-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jacob S Mann

Mailing Address 3875 Old Stage Rd S

City: Erwin State: NC Zip Code: 28339

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 19.50

**Transaction ID : f7bf22fa-eb62-4afb-8**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 99.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377888

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 60.00

**Transaction ID : 79f9b206-2fdc-40b9-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Pollreis

Mailing Address 15.5 Magnolia Circle

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 40.00

**Transaction ID : afddae6c-536e-4ed8-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 100.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377889

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Pollreis

Mailing Address 15.5 Magnolia Circle

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 5.22

**Transaction ID : 32b2b8cf-5123-4f63-a**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 30.00

**Transaction ID : 9b912a1c-f011-4158-a**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 35.22

(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377890

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 10.80

**Transaction ID : 76fe6b0c-d61f-4836-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brennan McAndrews

Mailing Address 44188 South Baptist RD

City: Hammond State: LA Zip Code: 70403

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 20.00

**Transaction ID : 9ee7dd6b-5f88-45e1-8**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 30.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brennan McAndrews

Mailing Address 44188 South Baptist RD

City Hammond | State LA | Zip Code 70403

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
1.50

**Transaction ID : 311445b8-5c25-4c94-a**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Amanda Boley

Mailing Address Split Oak Drive

City charlotte | State NC | Zip Code 28227

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
45.00

**Transaction ID : a22cd4a9-0759-41ac-9**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 46.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377892

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amanda Boley

Mailing Address
Split Oak Drive

City: charlotte
State: NC
Zip Code: 28227

Purpose of Expenditure
Mileage

Category/Type: 002

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
17.43

**Transaction ID : 7d2f00c4-3d7b-40d8-8**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Tammay Williams

Mailing Address
924 N. Prieur St

City: New Orleans
State: LA
Zip Code: 70116

Purpose of Expenditure
Salary

Category/Type: 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
40.00

**Transaction ID : d986c3db-170e-4e51-b**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 57.43

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377893

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 6.00

**Transaction ID : 4450df41-d5a1-42be-8**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City: Shreveport State: LA Zip Code: 71119

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 70.00

**Transaction ID : 795c2dc2-8c00-468f-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 76.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377894

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport | State LA | Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
17.10

**Transaction ID : 650ff670-c8d8-4737-b**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport | State LA | Zip Code 71104

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
40.00

**Transaction ID : 52be63ca-4176-4cac-9**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 57.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City: Shreveport State: LA Zip Code: 71104

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 10.80

**Transaction ID : 42e20d63-e016-4cbc-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Antoinette Franklin

Mailing Address 8822 Apple St

City: New Orleans State: LA Zip Code: 70188

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 40.00

**Transaction ID : 2366b206-c9fa-42bd-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 50.80

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377896

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 35.00

**Transaction ID : dcb75f9a-229a-4f75-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 26.40

**Transaction ID : f1611a97-cd41-4883-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 61.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377897

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carey T Henderson

Mailing Address 1025 Inverness Rd

City: Suthern Pines State: NC Zip Code: 28387

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 70.00

**Transaction ID : d8d814e8-d882-403a-a**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carey T Henderson

Mailing Address 1025 Inverness Rd

City: Suthern Pines State: NC Zip Code: 28387

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 7.20

**Transaction ID : 0655da33-f0c9-450c-8**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 77.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377898

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
75.00

**Transaction ID : 48d5d0ae-834e-45e0-8**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
28.80

**Transaction ID : e3e9e9a5-74aa-4d78-8**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 103.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377899

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Beverly Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
75.00

**Transaction ID : e260dae7-5ee5-4025-b**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City Searcy State AR Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
41.70

**Transaction ID : 1197dff2-a4ac-4b6f-9**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 116.70

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 27.57

**Transaction ID : d3745f36-64df-40bd-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francesca Blom

Mailing Address 101 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 75.00

**Transaction ID : ab4dae55-3f85-4af1-8**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 102.57

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377901

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 50.00

**Transaction ID : 75c1d3c2-f665-4323-a**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 35.10

**Transaction ID : 4e76461f-56a2-4426-a**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 85.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377902

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Theresa a Youngblood

Mailing Address 102 S Main Street Apt A2

City: Berryville State: VA Zip Code: 22611

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 40.00

**Transaction ID : ddd7a2ca-ab79-4ef7-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 80.00

**Transaction ID : b97dec20-e3a4-4ace-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 120.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377903

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City Winchester State VA Zip Code 22602

Purpose of Expenditure Salary

Category/Type 001

Date of Public Distribution/Dissemination 08 / 11 / 2014

Amount 80.00

Transaction ID : e43f261b-ecd7-4890-b

Date of Disbursement or Obligation 08 / 11 / 2014

Name of Federal Candidate Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City Winchester State VA Zip Code 22602

Purpose of Expenditure Salary

Category/Type 001

Date of Public Distribution/Dissemination 08 / 11 / 2014

Amount 80.00

Transaction ID : e7746e66-ce0f-4517-a

Date of Disbursement or Obligation 08 / 11 / 2014

Name of Federal Candidate Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 160.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377904

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney D Culbreth

Date of Public Distribution/Dissemination
08 / 11 / 2014

Mailing Address
100 Asbury CT
3200 Dam Neck Rd

Amount
80.00

City: Winchester
State: VA
Zip Code: 22602

**Transaction ID : 4a1c371f-213d-42b4-9**

Purpose of Expenditure
Salary

Category/Type: 001

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Rze Culbreath

Date of Public Distribution/Dissemination
08 / 11 / 2014

Mailing Address
100 Asbury Ct

Amount
80.00

City: Winchester
State: VA
Zip Code: 22602

**Transaction ID : 26571c77-561e-4f07-8**

Purpose of Expenditure
Salary

Category/Type: 001

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 160.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377905

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 25.00

**Transaction ID : 4b429fec-ce43-489d-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 6.54

**Transaction ID : d7e69fc8-1e89-4efb-a**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 31.54

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377906

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eric J Smith

Mailing Address 4967 Dysartville

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 80.00

**Transaction ID : c7b5d7a6-8434-487f-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 80.00

**Transaction ID : bc504368-ff90-42eb-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 160.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377907

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 10.50

**Transaction ID : 7b7366f2-cbbb-4137-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City: Wilmington State: NC Zip Code: 28405

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 65.00

**Transaction ID : 24d1d33c-4785-45e5-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 75.50

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377908

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City: Wilmington State: NC Zip Code: 28405

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 12.90

**Transaction ID : 2927e7a8-89f5-47af-8**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 35.00

**Transaction ID : 714f345c-3251-4474-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 47.90

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City Lafayette | State LA | Zip Code 70503

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
1.83

**Transaction ID : 52287fdd-1d82-435c-8**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Vonniqua Jackson

Mailing Address 111 Westchester Blvd
Apt D4

City Slidell | State LA | Zip Code 70458

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
23.00

**Transaction ID : 98632611-ac3e-4151-8**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 24.83

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377910

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Dylan Simon

Mailing Address 111 Millrock Drive

City Lafayette | State LA | Zip Code 70508

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
38.00

**Transaction ID : 0f83778c-ac07-44a3-b**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Dylan Simon

Mailing Address 111 Millrock Drive

City Lafayette | State LA | Zip Code 70508

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
9.12

**Transaction ID : f3881b67-b275-4020-9**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 47.12

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377911

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brandy Starns

Mailing Address 300 Evangeline St

City: Monroe State: LA Zip Code: 71201

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 50.00

**Transaction ID : 342269eb-d7ca-4631-8**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brandy Starns

Mailing Address 300 Evangeline St

City: Monroe State: LA Zip Code: 71201

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 15.60

**Transaction ID : d405d4f6-996f-494d-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 65.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377912

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 40.00

**Transaction ID : 43e7f2c3-ba18-48c0-8**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 8.70

**Transaction ID : 7356196d-93f9-4107-8**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 48.70

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377913

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shantal C Culbreath

Mailing Address 4691 Hercules Lane

City Woodbridge State VA Zip Code 22193

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
30.00

**Transaction ID : a076ea39-d81b-463f-a**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate

District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City Little Rock State AR Zip Code 72205

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
17.50

**Transaction ID : 3c1dc1ab-e5fb-44ea-b**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate

District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 47.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377914

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 4.50

**Transaction ID : 1ff77fcc-f76f-4f40-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City: Search State: AR Zip Code: 72149

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 80.00

**Transaction ID : fe8bf30d-7a51-423d-8**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 84.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377915

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City: Search State: AR Zip Code: 72149

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 7.80

**Transaction ID : dbfb0bce-6cd5-4202-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James Tatro

Mailing Address 1208 Braeburn Rd

City: Charlotte State: NC Zip Code: 28211

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 80.00

**Transaction ID : a9c82029-6784-4119-8**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 87.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377916

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Tatro

Mailing Address 1208 Braeburn Rd

City Charlotte | State NC | Zip Code 28211

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
6.60

**Transaction ID : 5efb9844-5e10-461a-a**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro | State NC | Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
75.00

**Transaction ID : 7894ff18-8d52-4ec1-9**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 81.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377917

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
22.80

**Transaction ID : 2d0dd6bb-9c7d-474b-b**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
40.00

**Transaction ID : 075253a5-eebb-4375-9**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 62.80

(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377918

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
0.90

**Transaction ID : 5dd9e50e-d7c7-42d8-b**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Gloria A Krieger

Mailing Address 1392 Lee Street

City Ville Platte State LA Zip Code 70586

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
13.00

**Transaction ID : a6814992-b164-421b-b**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 13.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377919

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gloria A Krieger

Mailing Address 1392 Lee Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 0.23

**Transaction ID : 794c64c8-e9b4-4f22-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Benjamin Hernandez

Mailing Address 915 E Market Ave

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 40.00

**Transaction ID : 5970923a-4421-4388-a**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 40.23

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377920

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Benjamin Hernandez

Mailing Address 915 E Market Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
4.50

**Transaction ID : 9f9a68b1-3bb2-4980-a**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City Ville Platte | State LA | Zip Code 70586

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
50.00

**Transaction ID : 3e131f4e-403a-4ca7-8**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 54.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377921

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 29.40

**Transaction ID : da87b571-f131-4dff-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Wayne Burckel

Mailing Address 46 Glenwood Ave

City: Harahan State: LA Zip Code: 70123

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 30.00

**Transaction ID : 3219940f-8db8-4601-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 59.40

(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377922

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Wayne Burckel

Mailing Address 46 Glenwood Ave

City Harahan | State LA | Zip Code 70123

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
0.30

**Transaction ID : f7b8fc6e-7174-4b75-b**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Alexa S Dudley

Mailing Address 4367 Splitlog Rd

City Goodman | State MO | Zip Code 64843

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
50.00

**Transaction ID : 88f8b28b-80e2-4c94-8**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 50.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377923

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Alexa S Dudley

Mailing Address 4367 Splitlog Rd

City Goodman State MO Zip Code 64843

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
25.20

**Transaction ID : 1d9b5963-f994-4c48-b**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Sarinda S Dudley

Mailing Address 4367 Splitlog Rd

City Goodman State MO Zip Code 64843

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
50.00

**Transaction ID : 62722cbd-bcb9-496d-8**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 75.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377924

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City Saltville State VA Zip Code 24370

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
80.00

**Transaction ID : 50866759-e4be-452b-8**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City Saltville State VA Zip Code 24370

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 11 / 2014

Amount
30.90

**Transaction ID : ddf8970a-2763-40da-8**

Date of Disbursement or Obligation
08 / 11 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 110.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377925

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Evelyn Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 70.00

**Transaction ID : 1687fa3d-8ff6-4d77-a**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Evelyn Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 6.00

**Transaction ID : 3acc0916-425e-4376-a**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 76.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377926

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brandon Guttuso

Mailing Address 3013 Transcontinental Dr

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 70.00

**Transaction ID : 03da3b17-85e3-4206-8**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brandon Guttuso

Mailing Address 3013 Transcontinental Dr

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 6.00

**Transaction ID : 9a62c05e-b74e-4dd8-8**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 76.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377927

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tarrin Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 70.00

**Transaction ID : 42d00e30-d987-4094-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tarrin Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 6.00

**Transaction ID : 130b5154-5655-46e6-a**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 76.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeanine Holmes

Mailing Address 206 Wildwood Dr

City: Hammond State: LA Zip Code: 70401

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 20.00

**Transaction ID : df24240e-c8d9-47fb-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeanine Holmes

Mailing Address 206 Wildwood Dr

City: Hammond State: LA Zip Code: 70401

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 2.70

**Transaction ID : 7c684ad4-64f4-493d-8**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 22.70

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377929

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Najib Mahmud

Mailing Address 3432 Riverrock Ct

City: Baton Rouge State: LA Zip Code: 70820

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 50.00

**Transaction ID : 395b8588-e265-4658-8**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Najib Mahmud

Mailing Address 3432 Riverrock Ct

City: Baton Rouge State: LA Zip Code: 70820

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 4.50

**Transaction ID : d9cc7197-d9be-4128-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 54.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377930

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Earl Stewart

Mailing Address 9455 Snow Camp Road

City: Snowcamp State: NC Zip Code: 27349

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 90.00

**Transaction ID : c28fe8df-7be7-479f-9**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Earl Stewart

Mailing Address 9455 Snow Camp Road

City: Snowcamp State: NC Zip Code: 27349

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 14.40

**Transaction ID : 47f427f2-4d6c-4c73-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 104.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377931

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gabriella E Hansen

Mailing Address 310 West Meath Drive

City: Winterville State: NC Zip Code: 28590

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 25.00

**Transaction ID : 9f8ac1f5-30fe-4d86-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Morgan R Padgett

Mailing Address 2164 Kay Rd

City: Greenville State: NC Zip Code: 27858

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 25.00

**Transaction ID : b29b6c6d-44ab-42b3-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 50.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377932

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Morgan R Padgett

Mailing Address 2164 Kay Rd

City: Greenville State: NC Zip Code: 27858

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 15.00

**Transaction ID : 7a64977f-8f6b-4199-a**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Felice Barrett

Mailing Address 1588 Asbury

City: Springdale State: AR Zip Code: 72762

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 20.00

**Transaction ID : 97fb21f2-0f03-464f-a**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 35.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377933

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Felice Barrett

Mailing Address 1588 Asbury

City: Springdale State: AR Zip Code: 72762

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 7.20

**Transaction ID : 89fafc1e-19de-4edc-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 40.00

**Transaction ID : dad65826-78d5-4b85-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 47.20

**(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377934

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 8.52

**Transaction ID : c40e7660-f666-42ca-a**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Matt Gleb

Mailing Address 3815 Robin Road

City: Ayden State: NC Zip Code: 28513

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 46.00

**Transaction ID : 8fe728e9-8b7f-4b86-a**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 54.52

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377935

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Matt Gleb

Mailing Address 3815 Robin Road

City Ayden | State NC | Zip Code 28513

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
24.00

**Transaction ID : 6b6dce7f-5c60-49df-a**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Casey Stockton

Mailing Address 105 South Dale St

City Spruce Pine | State NC | Zip Code 28777

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
30.00

**Transaction ID : 8af8ce2d-b8ec-4060-8**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 54.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377936

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Casey Stockton

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 19.20

**Transaction ID : 52bfcb4c-723b-4519-9**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mary Johnson

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 30.00

**Transaction ID : 84348cac-9c80-49c5-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 49.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377937

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Buchanan

Mailing Address 1090 McHone Rd

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 30.00

**Transaction ID : 65b4d2e2-bb44-4ea5-9**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Kassidy L Tyer

Mailing Address 41 Hawk Hollow Trail

City: Burgaw State: NC Zip Code: 28425

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 40.00

**Transaction ID : 15f38b86-c6ab-41c5-a**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 70.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377938

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kassidy L Tyer

Mailing Address 41 Hawk Hollow Trail

City: Burgaw State: NC Zip Code: 28425

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 18.00

**Transaction ID : 3d90c90b-ffcd-4d14-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Allie Butler

Mailing Address 1676 Shady Creek Rd

City: Ayden State: NC Zip Code: 28513

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 47.50

**Transaction ID : 825ae53a-6909-4014-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 65.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377939

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 50.00

**Transaction ID : 793c1884-24a6-4194-9**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 12.30

**Transaction ID : 993b8d50-7962-47d6-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 62.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377940

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 50.00

**Transaction ID : cfd33a5c-da7e-4a3a-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 26.40

**Transaction ID : 23c38414-5ebe-4e59-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 76.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377941

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 50.00

**Transaction ID : 1516f293-9c9f-4fd8-9**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 26.40

**Transaction ID : 43dc5f1e-57d6-4973-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 76.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377942

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jenna M Ledford

Mailing Address 2279 Gouges Creek Rd

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 70.00

**Transaction ID : 18c37240-2266-4847-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jenna M Ledford

Mailing Address 2279 Gouges Creek Rd

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 30.90

**Transaction ID : 7bab097d-091b-499d-a**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 100.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377943

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christine B Long

Mailing Address 3121 Charleycote Dr

City: Raleigh State: NC Zip Code: 27614

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 20.00

**Transaction ID : 654b711d-8790-4e29-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christine B Long

Mailing Address 3121 Charleycote Dr

City: Raleigh State: NC Zip Code: 27614

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 5.46

**Transaction ID : 08f6f83a-b1ea-469a-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 25.46

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377944

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 35.00

**Transaction ID : 708b41c8-e277-4bb4-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 26.40

**Transaction ID : 62d8d1ee-f0b6-45ee-b**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 61.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377945

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Morgan E Hallenbeck

Mailing Address 3790 Christian Light Rd

City: Fuquay Varina State: NC Zip Code: 27526

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 70.00

**Transaction ID : e2462475-0eb2-4ff5-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Morgan E Hallenbeck

Mailing Address 3790 Christian Light Rd

City: Fuquay Varina State: NC Zip Code: 27526

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 14.70

**Transaction ID : 39633d11-f35e-48de-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 84.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377946

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City: Wilmington State: NC Zip Code: 28405

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 35.00

**Transaction ID : 72214c0e-ffd9-481f-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City: Wilmington State: NC Zip Code: 28405

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 6.90

**Transaction ID : bb040b58-780b-4aff-a**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 41.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377947

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mark McNair

Mailing Address 11 Cooper Lane

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 34.00

**Transaction ID : 55a43a2f-e7e3-47dd-b**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mark McNair

Mailing Address 11 Cooper Lane

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 07 / 2014

Amount: 7.44

**Transaction ID : 243b806d-fa69-4bb2-a**

Date of Disbursement or Obligation: 08 / 07 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 41.44

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377948

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amanda Boley

Mailing Address
Split Oak Drive

City: charlotte
State: NC
Zip Code: 28227

Purpose of Expenditure
Salary

Category/Type: 001

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
47.50

**Transaction ID : af3ff98d-500c-4a86-8**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Amanda Boley

Mailing Address
Split Oak Drive

City: charlotte
State: NC
Zip Code: 28227

Purpose of Expenditure
Mileage

Category/Type: 002

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
18.90

**Transaction ID : 0b066e59-cedf-4e64-9**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 66.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377949

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joseph P Thierfelder
Previously filed under the name Pthierfelder

Mailing Address 2411 Armstrong

City: Gastonia State: NC Zip Code: 28054

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 35.00

**Transaction ID : 2585651d-c476-4d98-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Joseph P Thierfelder
Previously filed under the name Pthierfelder

Mailing Address 2411 Armstrong

City: Gastonia State: NC Zip Code: 28054

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 19.20

**Transaction ID : 7d2703e8-8354-413c-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 54.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377950

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Peter Sahuc

Mailing Address 107 Phillip Ave

City Lafayette | State LA | Zip Code 70503

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
35.00

**Transaction ID : bda3ba5e-e428-4c3c-9**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Peter Sahuc

Mailing Address 107 Phillip Ave

City Lafayette | State LA | Zip Code 70503

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
8.13

**Transaction ID : 96f05bca-1580-4bf0-9**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 43.13

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377951

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Antoinette Franklin

Mailing Address 8822 Apple St

City: New Orleans State: LA Zip Code: 70188

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 35.00

**Transaction ID : d55cfb9b-e81c-4967-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 60.00

**Transaction ID : 8a1dfcb0-f1d4-4717-a**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 95.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377952

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 13.50

**Transaction ID : 0338f6db-8528-4de7-9**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 30.00

**Transaction ID : 3370835b-c68c-4c39-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 43.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377953

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 24.00

**Transaction ID : 83940fd6-5187-4c38-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City: Spindale State: NC Zip Code: 28160

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 95.00

**Transaction ID : 4b546751-10ea-43be-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 119.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377954

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City: Spindale State: NC Zip Code: 28160

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 4.77

**Transaction ID : 918f1365-1745-4aba-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City: Raleigh State: NC Zip Code: 27610

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 14.50

**Transaction ID : e6144550-6aa3-421d-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 19.27

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377955

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City Raleigh | State NC | Zip Code 27610

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
6.90

**Transaction ID : 58af55f9-a134-4175-9**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Elizabeth DeMaine

Mailing Address 75 Stephenson Ln

City Sheridan | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
30.00

**Transaction ID : fb074ebd-76bf-4023-b**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 36.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Elizabeth DeMaine

Mailing Address 75 Stephenson Ln

City: Sheridan State: AR Zip Code: 72143

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 18.30

**Transaction ID : e9b30335-50f9-4a55-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 30.00

**Transaction ID : 09e19740-fad9-4497-a**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 48.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377957

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
80.00

**Transaction ID : 20f80935-62ab-4d93-8**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
18.90

**Transaction ID : 119608fb-3849-40ab-a**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 98.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377958

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Cari A Stevenson

Mailing Address 12312 Summer Cemetary Rd

City: Cabot State: AR Zip Code: 72023

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 10.00

**Transaction ID : 93481b04-0086-4ff8-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Cari A Stevenson

Mailing Address 12312 Summer Cemetary Rd

City: Cabot State: AR Zip Code: 72023

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 3.60

**Transaction ID : 9315d648-6cae-457e-a**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 13.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Barbara A Williams

Mailing Address
3002 Darden Rd
Apt A

City: Greensboro
State: NC
Zip Code: 27407

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 100.00

**Transaction ID : 4f664641-ac2f-4ec7-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nick Berryhill

Mailing Address
905 Lake Drive

City: Shelby
State: NC
Zip Code: 28152

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 62.00

**Transaction ID : 5c0d40ed-027b-4aea-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 162.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377960

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City: Shelby State: NC Zip Code: 28152

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 39.90

**Transaction ID : c14a03e7-1190-4633-a**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Dylan Simon

Mailing Address 111 Millrock Drive

City: Lafayette State: LA Zip Code: 70508

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 51.67

**Transaction ID : 7700b0e7-1510-4785-a**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 91.57

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Dylan Simon

Mailing Address 111 Millrock Drive

City Lafayette | State LA | Zip Code 70508

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
3.63

**Transaction ID : e367eca5-beef-44bc-9**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City Newport | State NC | Zip Code 28570

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
40.00

**Transaction ID : 74f41889-aaee-46ff-8**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 43.63

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377962

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City Newport | State NC | Zip Code 28570

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
9.21

**Transaction ID : 7216a707-9597-42f8-9**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Mr. Alex Peyton

Mailing Address 859 Hicks Rd

City Washington | State LA | Zip Code 70589

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
80.00

**Transaction ID : 0e0fd1ca-6e41-45d5-a**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 89.21

**(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.

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951377963

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Alex Peyton

Mailing Address 859 Hicks Rd

City: Washington State: LA Zip Code: 70589

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 41.40

**Transaction ID : 753f7550-e34a-4b6a-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jacob S Mann

Mailing Address 3875 Old Stage Rd S

City: Erwin State: NC Zip Code: 28339

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 20.00

**Transaction ID : da859a79-d2a5-4df8-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 61.40

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377964

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jacob S Mann

Mailing Address 3875 Old Stage Rd S

City: Erwin State: NC Zip Code: 28339

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 6.90

**Transaction ID : 696e8571-5381-4bce-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lesley Lennox

Mailing Address 2305 Cleary Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 25.00

**Transaction ID : 1ec0070e-b3ff-4930-a**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 31.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377965

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lesley Lennox

Mailing Address 2305 Cleary Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 2.10

**Transaction ID : 215b46a9-6419-4d2f-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Theresa A Touchet

Mailing Address 102 French Street #3

City: New Orleans State: LA Zip Code: 70124

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 14.00

**Transaction ID : 802b728f-1861-4953-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 16.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377966

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Theresa A Touchet

Mailing Address 102 French Street #3

City: New Orleans State: LA Zip Code: 70124

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 0.60

**Transaction ID : 8b9de5a0-aa2b-45b9-9**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Laura U Logie

Mailing Address 2565 Shire Circle

City: Harrisonburg State: VA Zip Code: 22801

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 17.50

**Transaction ID : 5def5fc1-06f2-4a38-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 18.10

**(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.

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951377967

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
40.00

**Transaction ID : dddd4d7b-bbad-469f-8**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
17.10

**Transaction ID : 1aff24fb-5b4a-4c5e-b**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 57.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Theresa a Youngblood

Mailing Address 102 S Main Street Apt A2

City: Berryville State: VA Zip Code: 22611

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 40.00

**Transaction ID : 105938d6-513f-4836-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 25.00

**Transaction ID : f8b8601b-6f51-4c7b-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 65.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377969

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 12.45

**Transaction ID : 524142df-8779-403b-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francesca Blom

Mailing Address 101 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 85.00

**Transaction ID : bd8c7659-ef0f-4e8a-a**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 97.45

**(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City: Sterling State: VA Zip Code: 20165

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 30.00

**Transaction ID : 0dda3df6-ac68-44cc-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 95.00

**Transaction ID : 698694c3-9127-406c-9**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 125.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 12.00

**Transaction ID : b1d6ebe7-436c-430d-a**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 65.00

**Transaction ID : fb1ba350-cb41-406d-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 77.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 28.20

**Transaction ID : d07a08cb-3dc3-4419-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 35.00

**Transaction ID : da468ce6-8981-48a2-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 63.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377973

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 6.00

**Transaction ID : eaa00fb0-0ce7-4c9f-a**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City: METAIRIE State: LA Zip Code: 70003

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 65.00

**Transaction ID : 2987c573-1e5f-4156-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 71.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377974

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
1.50

**Transaction ID : 5091dd6f-7bbc-420a-8**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
100.00

**Transaction ID : 704e5fa2-b44a-4eaf-a**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 101.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377975

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
22.80

**Transaction ID : 16fac921-4c11-4de7-b**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
85.00

**Transaction ID : c27e5df6-6991-4f66-a**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 107.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377976

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Phillip Williams

Date of Public Distribution/Dissemination
08 / 12 / 2014

Mailing Address 3007 Darden Rd

Amount
21.60

City Greensboro | State NC | Zip Code 27407

**Transaction ID : 0ba583b3-f532-46db-b**

Purpose of Expenditure
Mileage

Category/Type 002

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Beverly Williams

Date of Public Distribution/Dissemination
08 / 12 / 2014

Mailing Address 3007 Darden Rd

Amount
85.00

City Greensboro | State NC | Zip Code 27407

**Transaction ID : 273842a9-48fb-423c-a**

Purpose of Expenditure
Salary

Category/Type 001

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 106.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377977

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jessica Habakjian

Mailing Address 4193 W. Lang St

City Farmville | State NC | Zip Code 27828

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
20.00

**Transaction ID : 4251e964-dd29-49e1-a**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Jessica Habakjian

Mailing Address 4193 W. Lang St

City Farmville | State NC | Zip Code 27828

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
4.50

**Transaction ID : 7932ab10-db80-4be5-9**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 24.50

**(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.

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951377978

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City Lafayette | State LA | Zip Code 70503

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
35.00

**Transaction ID : b080ce1b-b42c-4232-a**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City Lafayette | State LA | Zip Code 70503

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
4.80

**Transaction ID : ef441df3-20a0-4bf7-9**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 39.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377979

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 21.50

**Transaction ID : 6d9526e7-df7a-4d91-9**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 4.50

**Transaction ID : 7676212e-3ded-4441-a**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 26.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377980

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Vonniqua Jackson

Mailing Address 111 Westchester Blvd
Apt D4

City: Slidell State: LA Zip Code: 70458

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 43.00

**Transaction ID : a4ed1860-1116-419e-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 70.00

**Transaction ID : d68b3e34-9e5f-46c9-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 113.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377981

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 10.65

**Transaction ID : a6aa368e-d318-4b0f-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City: Kenner State: LA Zip Code: 70065

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 25.00

**Transaction ID : daab0cd4-6815-4949-9**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 35.65

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377982

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City: Kenner State: LA Zip Code: 70065

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 8.01

**Transaction ID : e977bdfc-440f-4c0a-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 40.00

**Transaction ID : 7ebcf722-a8f4-4c92-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 48.01

**(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.

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951377983

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City Raleigh | State NC | Zip Code 27604

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
7.80

**Transaction ID : 49368a9f-a0a8-4651-8**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Marysol Netro

Mailing Address 312 S Gunter St

City Siloam Springs | State AR | Zip Code 72761

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
30.00

**Transaction ID : 278a9ddd-7051-4646-b**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 37.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377984

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Marysol Netro

Date of Public Distribution/Dissemination
08 / 12 / 2014

Mailing Address 312 S Gunter St

Amount
2.40

City: Siloam Springs | State: AR | Zip Code: 72761

**Transaction ID : 6b374759-ae01-4bd4-8**

Purpose of Expenditure: Mileage | Category/Type: 002

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James Tatro

Date of Public Distribution/Dissemination
08 / 12 / 2014

Mailing Address 1208 Braeburn Rd

Amount
50.00

City: Charlotte | State: NC | Zip Code: 28211

**Transaction ID : 510f89cb-037a-4ada-b**

Purpose of Expenditure: Salary | Category/Type: 001

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 52.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377985

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Tatro

Mailing Address 1208 Braeburn Rd

City: Charlotte State: NC Zip Code: 28211

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 5.70

**Transaction ID : 4a60c892-6c44-4dd2-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 92.50

**Transaction ID : b3503e3d-3e03-4e64-a**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 98.20

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951377986

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 14.70

**Transaction ID : e8b06981-f6d7-4ab2-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 80.00

**Transaction ID : 207ef32f-179d-46b8-a**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 94.70

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951377987

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City Winchester State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
80.00

**Transaction ID : 8e7752e4-d581-428a-9**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rodney D Culbreth

Mailing Address 100 Asbury CT
3200 Dam Neck Rd

City Winchester State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
80.00

**Transaction ID : e1e822c9-421f-4dc1-a**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 160.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377988

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rze Culbreath

Mailing Address 100 Asbury Ct

City Winchester State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
80.00

**Transaction ID : 68022fcb-cf63-40b0-a**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City Winchester State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
60.00

**Transaction ID : 2f9f359c-269c-4e54-b**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 140.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377989

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
105.00

**Transaction ID : 11941c4a-a58b-43e0-9**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
21.30

**Transaction ID : 2188e232-985c-4353-a**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 126.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377990

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 87.50

**Transaction ID : 667a4490-9cc2-4fde-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 19.20

**Transaction ID : 1d7d704c-e53f-44f4-a**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 106.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377991

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 80.00

**Transaction ID : 50a2cfe6-5471-4e8b-9**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 28.50

**Transaction ID : ab249b7f-4ca9-421b-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 108.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377992

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Sarinda S Dudley

Mailing Address 4367 Splitlog Rd

City Goodman State MO Zip Code 64843

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
20.00

**Transaction ID : 2a849e24-47d3-4595-a**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Sarinda S Dudley

Mailing Address 4367 Splitlog Rd

City Goodman State MO Zip Code 64843

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
25.50

**Transaction ID : c8ad8398-5b9b-4f5e-8**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 45.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377993

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Alexa S Dudley

Mailing Address 4367 Splitlog Rd

City: Goodman State: MO Zip Code: 64843

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 20.00

**Transaction ID : 99eee8f1-8ac7-4c27-a**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Elizabeth Hanks

Mailing Address 891 W. Melmar

City: Fayetteville State: AR Zip Code: 72703

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 50.00

**Transaction ID : 341b6f0a-50c6-48f6-9**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 70.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377994

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Elizabeth Hanks

Mailing Address 891 W. Melmar

City: Fayetteville State: AR Zip Code: 72703

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 14.70

**Transaction ID : 63311a38-b3ff-4fb6-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James E Dacus

Mailing Address 117 Cynthia Ave

City: Farmington State: AR Zip Code: 72730

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 20.00

**Transaction ID : b60d5ae2-65da-45e7-9**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 34.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377995

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shantal C Culbreath

Mailing Address 4691 Hercules Lane

City: Woodbridge State: VA Zip Code: 22193

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 30.00

**Transaction ID : e7a89c8c-4880-4158-8**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Reagan Brackett
Originally reported against Kay Hagan, corrected with filing

Mailing Address 502 E Center Ave

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 40.00

**Transaction ID : 0108ccd8-c758-4685-9**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 70.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377996

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amelia Brackett
Originally reported against Kay Hagan, corrected with filing

Mailing Address 804 Roundabout Circle

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 40.00

**Transaction ID : 5af38b44-90a9-44e9-9**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Amelia Brackett
Originally reported against Kay Hagan and $8.46, corrected with

Mailing Address 804 Roundabout Circle

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 8.10

**Transaction ID : df3eaa73-7a04-4227-a**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 48.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377997

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Pollreis

Mailing Address 15.5 Magnolia Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
30.00

**Transaction ID : 5e0f44a1-c12e-4a61-a**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Pollreis

Mailing Address 15.5 Magnolia Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
11.10

**Transaction ID : ad1d1dbf-3c98-438e-8**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 41.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377998

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Xavier Miller

Mailing Address 407 randall Dr

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 30.00

**Transaction ID : fe5f8d63-65ab-40a6-a**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James W Blevins

Mailing Address 108 East Clinton St
PO Box 410

City: Salemburg State: NC Zip Code: 28385

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 15.00

**Transaction ID : 5f041892-b617-423e-8**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 45.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951377999

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James W Blevins

Date of Public Distribution/Dissemination
08 / 08 / 2014

Mailing Address
108 East Clinton St
PO Box 410

Amount
7.86

City: Salemburg State: NC Zip Code: 28385

**Transaction ID : 3f3d031e-6a54-4186-b**

Purpose of Expenditure
Mileage

Category/Type 002

Date of Disbursement or Obligation
08 / 08 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Morgan R Padgett

Date of Public Distribution/Dissemination
08 / 13 / 2014

Mailing Address
2164 Kay Rd

Amount
20.00

City: Greenville State: NC Zip Code: 27858

**Transaction ID : 323c537f-f803-4f04-9**

Purpose of Expenditure
Salary

Category/Type 001

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 27.86

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378000

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Dwayne C Smith

Mailing Address 900 Bramblegate Rd

City: Hope Mills State: NC Zip Code: 28348

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 30.00

**Transaction ID : 0167bb4a-9902-4df9-9**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Dwayne C Smith

Mailing Address 900 Bramblegate Rd

City: Hope Mills State: NC Zip Code: 28348

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 2.25

**Transaction ID : e53dca84-da07-4c4e-b**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 32.25

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378001

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shannon E Downey

Mailing Address 112 Brookhollow Drive

City: Mount Holly State: NC Zip Code: 28120

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 30.00

**Transaction ID : cfdd7ce4-3545-453f-a**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shannon E Downey

Mailing Address 112 Brookhollow Drive

City: Mount Holly State: NC Zip Code: 28120

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 08 / 2014

Amount: 4.80

**Transaction ID : a014ee8e-2d19-4ce8-9**

Date of Disbursement or Obligation: 08 / 08 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 34.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378002

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Chick-Fil-A

Mailing Address Unknown

City: Lynchburg State: VA Zip Code: 24501

Purpose of Expenditure: Food
Category/Type: 007

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 6.24

**Transaction ID : 95058a51-9e51-422b-9**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ky Broussard

Mailing Address 301 N Cedar Street

City: Abbeville State: LA Zip Code: 70510

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 20.00

**Transaction ID : c13e00f1-664d-4526-b**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 26.24

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378003

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ky Broussard

Mailing Address 301 N Cedar Street

City Abbeville State LA Zip Code 70510

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
18.00

**Transaction ID : 3bd03444-bbc2-4b6e-b**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Gabriella E Hansen

Mailing Address 310 West Meath Drive

City Winterville State NC Zip Code 28590

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
20.00

**Transaction ID : 4d0aefc0-14ad-4d58-a**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 38.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378004

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gabriella E Hansen

Mailing Address 310 West Meath Drive

City Winterville | State NC | Zip Code 28590

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
14.40

**Transaction ID : 73da1a06-7c3a-4b58-a**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Casey Stockton

Mailing Address 105 South Dale St

City Spruce Pine | State NC | Zip Code 28777

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
70.00

**Transaction ID : a3d095ed-af4d-4f2b-a**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 84.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378005

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mary Johnson

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 70.00

**Transaction ID : 6d74c758-5497-49a3-8**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Anthony Buchanan

Mailing Address 1090 McHone Rd

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 70.00

**Transaction ID : 33c4893e-a4d9-438d-9**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 140.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Buchanan

Mailing Address 1090 McHone Rd

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 23.10

**Transaction ID : e7c70aa9-5b62-439d-b**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 40.00

**Transaction ID : b4d2d00e-b06a-4275-b**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 63.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378007

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City Charlotte | State NC | Zip Code 23215

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
8.40

**Transaction ID : 9855d808-68bd-47aa-9**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mr. Haley Brown

Mailing Address 344 Natalie Drive

City Winston-Salem | State NC | Zip Code 27030

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
10.00

**Transaction ID : 1b544fa6-7166-4807-8**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 18.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378008

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Haley Brown

Mailing Address 344 Natalie Drive

City: Winston-Salem State: NC Zip Code: 27030

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 1.80

**Transaction ID : 27b168fd-8d8a-470f-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Gina Martin

Mailing Address 1115 Oakwood Dr

City: Belmont State: NC Zip Code: 28012

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 25.00

**Transaction ID : 44bac7e0-3e41-48ee-8**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 26.80

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378009

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shannon E Downey

Mailing Address 112 Brookhollow Drive

City: Mount Holly State: NC Zip Code: 28120

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 25.00

**Transaction ID : 920b0bea-54df-4206-9**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shannon E Downey

Mailing Address 112 Brookhollow Drive

City: Mount Holly State: NC Zip Code: 28120

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 1.80

**Transaction ID : 80d1bfad-3cbc-46f0-8**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 26.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378010

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Laura U Logie

Mailing Address 2565 Shire Circle

City: Harrisonburg State: VA Zip Code: 22801

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 22.50

**Transaction ID : 385f2a3e-d426-453a-b**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Julie Clifton

Mailing Address 712 St. Martin Lane

City: Bossier City State: LA Zip Code: 71111

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 13.00

**Transaction ID : 94627031-419e-440f-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 35.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378011

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Julie Clifton

Mailing Address 712 St. Martin Lane

City: Bossier City | State: LA | Zip Code: 71111

Purpose of Expenditure: Mileage | Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 3.60

**Transaction ID : fa1d3b95-cb26-4ba9-8**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Karl L Starns

Mailing Address 4120 Bon Aire Dr
Apt 6307

City: Monroe | State: LA | Zip Code: 71212

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 40.00

**Transaction ID : e551085b-818d-4dab-8**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 43.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378012

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Karl L Starns

Mailing Address
4120 Bon Aire Dr
Apt 6307

City: Monroe State: LA Zip Code: 71212

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 74.70

**Transaction ID : 89102c14-84de-4296-b**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
David Ford

Mailing Address
106 Hillside St

City: Spindale State: NC Zip Code: 28160

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 80.00

**Transaction ID : 9843807d-bf99-4852-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 154.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378013

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City: Spindale State: NC Zip Code: 28160

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 69.96

**Transaction ID : 044277ee-b10c-419a-b**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Office Depot

Mailing Address 6401 Blue Bonnet Blvd

City: Baton Rouge State: LA Zip Code: 70801

Purpose of Expenditure: can_off

Category/Type: 006

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 239.73

**Transaction ID : 634d25f6-3c0b-4eb3-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 309.69

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378014

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 50.00

**Transaction ID : ac8e996e-c774-4a1a-8**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 23.40

**Transaction ID : e9c50978-a0ef-4271-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 73.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 50.00

**Transaction ID : f1ca55b7-5fdd-4e20-9**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 23.40

**Transaction ID : f5ca3725-0f67-46cc-b**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 73.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378016

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danelle M Hallenbeck

Mailing Address 2103 Millcroft Rd

City: Pleasant Garden State: NC Zip Code: 27313

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 10.00

**Transaction ID : 9351cdd5-eee5-4849-9**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Danelle M Hallenbeck

Mailing Address 2103 Millcroft Rd

City: Pleasant Garden State: NC Zip Code: 27313

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 29.40

**Transaction ID : 72b5921f-d26b-454b-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 39.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378017

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City Shelby State NC Zip Code 28152

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
40.00

**Transaction ID : ffa52815-f893-4d0d-a**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City Shelby State NC Zip Code 28152

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
31.80

**Transaction ID : 4dc3deea-c16c-4e05-9**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 71.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378018

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Vonniqua Jackson

Mailing Address
111 Westchester Blvd
Apt D4

City: Slidell
State: LA
Zip Code: 70458

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 80.00

**Transaction ID : e5ad3f3f-edf3-400d-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Steven Best

Mailing Address
103 Washington Ave

City: Newport
State: NC
Zip Code: 28570

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 33.00

**Transaction ID : 7a25f9d1-f2ed-44a6-8**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 113.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378019

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City: Newport State: NC Zip Code: 28570

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 7.71

**Transaction ID : a1c8df11-a68a-47e6-9**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City: Sterling State: VA Zip Code: 20165

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 60.00

**Transaction ID : c3fdb4f2-07f7-4357-8**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 67.71

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378020

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kassidy L Tyer

Mailing Address 41 Hawk Hollow Trail

City Burgaw State NC Zip Code 28425

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
30.00

**Transaction ID : a5720dff-aa07-4fa7-a**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kassidy L Tyer

Mailing Address 41 Hawk Hollow Trail

City Burgaw State NC Zip Code 28425

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
15.00

**Transaction ID : b9cf04d2-2613-47d0-8**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 45.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 60.00

**Transaction ID : 93171de9-693a-4029-9**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 5.85

**Transaction ID : 5eab3d3f-8b15-4dd9-b**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 65.85

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378022

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City Search | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
30.00

**Transaction ID : 990a9af1-748f-4e05-8**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City Search | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
3.00

**Transaction ID : 912d4b90-5ae5-4648-a**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 33.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378023

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Alex Peyton

Mailing Address 859 Hicks Rd

City: Washington State: LA Zip Code: 70589

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 60.00

**Transaction ID : 7b57a34f-4a37-41b9-9**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mr. Alex Peyton

Mailing Address 859 Hicks Rd

City: Washington State: LA Zip Code: 70589

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 42.00

**Transaction ID : 1b979411-74c5-4a89-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 102.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378024

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carey T Henderson

Mailing Address 1025 Inverness Rd

City: Suthern Pines State: NC Zip Code: 28387

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 90.00

**Transaction ID : 8c05fb47-25b1-43ee-9**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carey T Henderson

Mailing Address 1025 Inverness Rd

City: Suthern Pines State: NC Zip Code: 28387

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 24.30

**Transaction ID : 4bada56a-48af-4372-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 114.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378025

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
40.00

**Transaction ID : ca0a1867-c0ae-4853-9**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
35.10

**Transaction ID : 3750d4a7-92a1-4c8f-9**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 75.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378026

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Elizabeth DeMaine

Mailing Address 75 Stephenson Ln

City Sheridan | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
25.00

**Transaction ID : 771010a6-ae5b-4bb6-a**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Elizabeth DeMaine

Mailing Address 75 Stephenson Ln

City Sheridan | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
14.10

**Transaction ID : a7175594-cd88-402d-8**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 39.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Antoinette Franklin

Mailing Address 8822 Apple St

City: New Orleans State: LA Zip Code: 70188

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 40.00

**Transaction ID : c1effb1c-0b4a-4e66-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joseph P Thierfelder
Previously filed under the name Pthierfelder

Mailing Address 2411 Armstrong

City: Gastonia State: NC Zip Code: 28054

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 90.00

**Transaction ID : defa934f-d80e-4534-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 130.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carmen Maddrey

Mailing Address 2043 Nottingham Ln

City: Burlington State: NC Zip Code: 27215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 80.00

**Transaction ID : 68288f64-6227-4b2b-9**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carmen Maddrey

Mailing Address 2043 Nottingham Ln

City: Burlington State: NC Zip Code: 27215

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 36.00

**Transaction ID : 439e2c97-03b4-49de-9**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 116.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
32.50

**Transaction ID : 7ce6baa9-1798-482f-9**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
18.27

**Transaction ID : d78fdcf7-e419-4254-9**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 50.77

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378030

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Caleb Craig

Mailing Address 1410 Bushville drive

City Lenoir | State NC | Zip Code 28645

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
80.00

**Transaction ID : b65b1c2f-7f1b-43e0-9**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Caleb Craig

Mailing Address 1410 Bushville drive

City Lenoir | State NC | Zip Code 28645

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
6.90

**Transaction ID : 2d0a94e4-ef6d-43d9-a**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 86.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378031

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Barbara E Spritz

Mailing Address 3346 Durham St Ext

City: Burlington State: NC Zip Code: 27217

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 10.00

**Transaction ID : e4496532-6ba7-4882-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Barbara E Spritz

Mailing Address 3346 Durham St Ext

City: Burlington State: NC Zip Code: 27217

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 36.00

**Transaction ID : f68f9008-3404-4be6-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 46.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 20.00

**Transaction ID : e49edf36-2297-42c2-b**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 2.10

**Transaction ID : 167a5b0d-ba1e-420e-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 22.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nicole N Ball

Mailing Address 2528 Mill Creek Rd

City Newport State NC Zip Code 28570

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
20.00

**Transaction ID : f5879b84-dc90-4074-9**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nicole N Ball

Mailing Address 2528 Mill Creek Rd

City Newport State NC Zip Code 28570

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
12.00

**Transaction ID : de7a8a57-ab8b-4915-a**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 32.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378034

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City: Wilmington State: NC Zip Code: 28405

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 50.00

**Transaction ID : 0c162103-6007-4a34-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City: Wilmington State: NC Zip Code: 28405

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 18.60

**Transaction ID : ac82b8a5-af37-4b19-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 68.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378035

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Barbara A Williams

Mailing Address
3002 Darden Rd
Apt A

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 100.00

**Transaction ID : 327e83c2-a211-4490-8**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Andrea L Hammond

Mailing Address
12920 Kneeland Ln

City: Neosho State: MO Zip Code: 64850

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 20.00

**Transaction ID : a4571e21-2853-4eef-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 120.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Andrea L Hammond

Mailing Address 12920 Kneeland Ln

City Neosho State MO Zip Code 64850

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
6.60

**Transaction ID : c8fbe70a-9df5-411f-a**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mattie Harris

Mailing Address 3654 Tara St

City springdale State AR Zip Code 72762

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
30.00

**Transaction ID : 0884e9bc-12a3-46d6-a**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 36.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378037

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mattie Harris

Mailing Address 3654 Tara St

City springdale State AR Zip Code 72762

Purpose of Expenditure Mileage

Category/Type 002

Date of Public Distribution/Dissemination 08 / 13 / 2014

Amount 8.10

**Transaction ID : f3315a11-b322-4cfe-8**

Date of Disbursement or Obligation 08 / 13 / 2014

Name of Federal Candidate Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Aaron Credeur

Mailing Address 234 East Musique Rd

City Carencro State LA Zip Code 70520

Purpose of Expenditure Salary

Category/Type 001

Date of Public Distribution/Dissemination 08 / 13 / 2014

Amount 50.00

**Transaction ID : 21168a8b-901e-401f-a**

Date of Disbursement or Obligation 08 / 13 / 2014

Name of Federal Candidate Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 58.10

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Aaron Credeur

Mailing Address 234 East Musique Rd

City: Carencro State: LA Zip Code: 70520

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 20.40

**Transaction ID : a22d3a6f-845d-43b4-8**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
David M Bozeman

Mailing Address 768 Pine Haven Drive

City: Fayetteville State: NC Zip Code: 28306

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 10.00

**Transaction ID : cf459ac1-6ec6-411a-b**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 30.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David M Bozeman

Mailing Address 768 Pine Haven Drive

City Fayetteville | State NC | Zip Code 28306

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
0.90

**Transaction ID : f7c61d39-689d-4613-9**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Cory Bryson

Mailing Address 216 Dogwood Ln

City Belmont | State NC | Zip Code 28012

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
65.00

**Transaction ID : d3ebf3ef-f724-490c-9**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 65.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378040

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Cory Bryson

Mailing Address 216 Dogwood Ln

City Belmont | State NC | Zip Code 28012

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
18.00

**Transaction ID : a5c80eed-68df-414b-a**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francesca Blom

Mailing Address 101 Asbury Ct

City Winchester | State VA | Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
80.00

**Transaction ID : 2ed48f7a-c66f-420c-a**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 98.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378041

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 60.00

**Transaction ID : 7ad6921d-9ed4-46a2-8**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 13.50

**Transaction ID : b5ff2d06-b6cf-41de-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 73.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378042

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
70.00

**Transaction ID : a2f9d9c0-d5a3-4fb9-a**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
12.60

**Transaction ID : 9b48b7ee-833c-408f-9**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 82.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378043

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lesley Lennox

Mailing Address 2305 Cleary Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 25.00

**Transaction ID : b8375b4f-9d2f-4a10-b**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lesley Lennox

Mailing Address 2305 Cleary Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 2.70

**Transaction ID : 841767e0-58eb-4454-b**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 27.70

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378044

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Tatro

Mailing Address 1208 Braeburn Rd

City: Charlotte State: NC Zip Code: 28211

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 60.00

**Transaction ID : 9981af3e-45a2-4f28-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James Tatro

Mailing Address 1208 Braeburn Rd

City: Charlotte State: NC Zip Code: 28211

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 3.30

**Transaction ID : c190dec2-b782-49cb-b**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 63.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378045

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Stephanie L Heun

Mailing Address 8026 S Wilwood Dr Apt 101

City: Oak Creek State: WI Zip Code: 53154

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 35.00

**Transaction ID : 74e7f091-9d9e-41af-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eric J Smith

Mailing Address 4967 Dysartville

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 80.00

**Transaction ID : cde68658-0167-4d8e-9**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 115.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378046

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City Morganton State NC Zip Code 28655

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
80.00

**Transaction ID : 4dfc7b7e-1e86-4411-a**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City Morganton State NC Zip Code 28655

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
9.00

**Transaction ID : 8fde9e13-9da4-45bd-8**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378047

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City Raleigh | State NC | Zip Code 27610

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
30.00

**Transaction ID : 4b72e3d1-754c-4a81-a**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City Raleigh | State NC | Zip Code 27610

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
3.60

**Transaction ID : 8c2989e2-21dd-43bf-9**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 33.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378048

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City Ville Platte | State LA | Zip Code 70586

Purpose of Expenditure Salary | Category/Type 001

Date of Public Distribution/Dissemination 08 / 13 / 2014

Amount 65.00

**Transaction ID : 2fc8bd62-ea28-4e5b-a**

Date of Disbursement or Obligation 08 / 13 / 2014

Name of Federal Candidate Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City Ville Platte | State LA | Zip Code 70586

Purpose of Expenditure Mileage | Category/Type 002

Date of Public Distribution/Dissemination 08 / 13 / 2014

Amount 30.90

**Transaction ID : a76e202e-bf79-4737-b**

Date of Disbursement or Obligation 08 / 13 / 2014

Name of Federal Candidate Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 95.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City: Kenner State: LA Zip Code: 70065

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 55.00

**Transaction ID : c6f5a94f-7d50-4c43-8**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City: Kenner State: LA Zip Code: 70065

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 9.66

**Transaction ID : 884981b3-7821-4819-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 64.66

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378050

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
60.00

**Transaction ID : ef9a38da-a3ee-4794-b**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
34.50

**Transaction ID : e39a7dfa-a1da-4627-9**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 94.50

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378051

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
40.00

**Transaction ID : 27cf5351-b9e7-4800-b**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
15.60

**Transaction ID : a03e92a9-fea1-459b-b**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 55.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378052

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Reagan Brackett

Mailing Address 502 E Center Ave

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
40.00

**Transaction ID : f26ee147-be5e-4006-b**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Amelia Brackett

Mailing Address 804 Roundabout Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
40.00

**Transaction ID : 3b9e5524-7e50-4db4-8**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 80.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amelia Brackett

Mailing Address 804 Roundabout Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
8.46

**Transaction ID : 12096f31-299b-4bcf-b**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City Little Rock | State AR | Zip Code 72205

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
20.00

**Transaction ID : d6413c7e-dc57-4446-b**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 28.46

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378054

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 3.60

**Transaction ID : 11ebb738-d364-471b-9**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 35.00

**Transaction ID : 68ac0f50-abf1-44da-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 38.60

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378055

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City Lafayette | State LA | Zip Code 70503

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
3.00

**Transaction ID : 3c44abda-77cd-4aee-a**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City North Little rock | State AR | Zip Code 72116

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
60.00

**Transaction ID : 3d6907da-7618-45e1-b**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 63.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 10.68

**Transaction ID : 419fffa7-a06d-401f-8**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 50.00

**Transaction ID : 4c8cf31f-bece-44e9-8**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 60.68

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378057

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 11.40

**Transaction ID : c1741c34-7bc3-4f80-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 60.00

**Transaction ID : 097dc0ac-6cd1-4ac4-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 71.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378058

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 56.49

**Transaction ID : cab9b8a7-f4a3-402c-b**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 75.00

**Transaction ID : 7c204b4e-cf2d-40b9-9**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 131.49

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378059

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 30.60

**Transaction ID : e683e9b0-72db-46c1-9**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Elizabeth Hanks

Mailing Address 891 W. Melmar

City: Fayetteville State: AR Zip Code: 72703

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 45.00

**Transaction ID : a307697e-3c7b-4078-9**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 75.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Elizabeth Hanks

Mailing Address 891 W. Melmar

City: Fayetteville State: AR Zip Code: 72703

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 8.40

**Transaction ID : 51344af9-b0cf-4c63-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joanna Kindstedt

Mailing Address 2134 Tobaccoville Rd

City: Rural Hall State: NC Zip Code: 27045

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 10.00

**Transaction ID : be22b206-e647-466c-b**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 18.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378061

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Roger McKinney

Mailing Address 308 West Main Street

City: Pilot Mountian State: NC Zip Code: 27041

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 84.50

**Transaction ID : 7a98c7d4-319b-40c1-b**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mr. Roger McKinney

Mailing Address 308 West Main Street

City: Pilot Mountian State: NC Zip Code: 27041

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 26.73

**Transaction ID : dfde0be3-49c4-4ff0-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 111.23

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378062

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Glenda McKinney

Mailing Address 308 West Main Street

City: Plot Mountain State: NC Zip Code: 27041

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 84.50

**Transaction ID : 14d8d1db-ce64-40bd-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 80.00

**Transaction ID : 57525efa-84ac-4650-b**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 164.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 80.00

**Transaction ID : f119a95b-89c0-4aa1-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 100.00

**Transaction ID : 5369ab73-db37-4f53-8**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 180.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378064

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 15.90

**Transaction ID : 0cbecf95-e01a-46ca-b**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rodney D Culbreth

Mailing Address 100 Asbury CT
3200 Dam Neck Rd

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 80.00

**Transaction ID : 6ef3a507-cb1d-4a53-8**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 95.90

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378065

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rze Culbreath

Mailing Address 100 Asbury Ct

City Winchester | State VA | Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
80.00

**Transaction ID : 3bb74c29-43c7-4a62-8**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City Winchester | State VA | Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
70.00

**Transaction ID : 523ebcbe-c92d-4b8d-b**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 150.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378066

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
50.00

**Transaction ID : 6539baaa-2ed0-4401-b**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
1.20

**Transaction ID : 6cfbbe0a-9ccd-4c82-a**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 51.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
90.00

**Transaction ID : 7b2a4ece-277a-4611-b**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
25.80

**Transaction ID : 9ecd63d6-9dd4-417b-b**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 115.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378068

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Beverly Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
90.00

**Transaction ID : 196e103b-ce4a-44aa-8**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City Raleigh State NC Zip Code 27604

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
90.00

**Transaction ID : cc6b1239-14b8-48eb-a**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 180.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378069

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City Raleigh State NC Zip Code 27604

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
12.60

**Transaction ID : 3d4092ef-c059-472c-b**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Taylor N Randall

Mailing Address 2002 E Park Ave
Apt 40

City Searcy State AR Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
60.00

**Transaction ID : c6ae10f5-bf59-41c6-9**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 72.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378070

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Darius Beverly

Mailing Address 157 Bishop Drive

City: Avondale State: LA Zip Code: 70094

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 40.00

**Transaction ID : 24bdc767-2fc1-46be-8**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shelbi L Randall

Mailing Address 202 East Park Ave Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 60.00

**Transaction ID : 9fc06b81-d6b8-4c3f-8**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 100.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shelbi L Randall

Mailing Address 202 East Park Ave Apt 40

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
13.88

**Transaction ID : edf27efc-ce5c-420a-b**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Dinah Beverly

Mailing Address 157 Bishop Drive

City Avondale | State LA | Zip Code 70064

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
40.00

**Transaction ID : 051c6f3c-c299-4450-b**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 53.88

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Dinah Beverly

Mailing Address 157 Bishop Drive

City: Avondale State: LA Zip Code: 70064

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 5.10

**Transaction ID : f8916390-e2e7-4b72-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 100.00

**Transaction ID : 27221d53-be42-4950-8**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 105.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 19.80

**Transaction ID : 2c4a50e8-e72f-4ae9-8**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 112.50

**Transaction ID : bb0d83f4-8f2e-49b8-b**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 132.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378074

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 21.90

**Transaction ID : 9e1f6fb6-adef-4b67-9**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James Kindstedt

Mailing Address 5510 Dogwood Dr

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 10.00

**Transaction ID : 10bbb505-03ef-41dc-8**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 31.90

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Kindstedt

Mailing Address 5510 Dogwood Dr

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 13.86

**Transaction ID : d03027e4-7068-4fae-9**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 87.50

**Transaction ID : 1e5395ee-cf1b-4f91-9**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 101.36

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378076

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
17.10

**Transaction ID : bdae8e4b-b087-4ee8-9**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nathan Smith

Mailing Address 1247 W Mt Comfort Rd

City Fayatteville State AR Zip Code 72703

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
24.00

**Transaction ID : be8a66c1-dbee-47c3-b**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 41.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378077

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nathan Smith

Mailing Address 1247 W Mt Comfort Rd

City: Fayatteville State: AR Zip Code: 72703

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 6.72

**Transaction ID : ef5b0139-77cc-44ef-b**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shanon Snyder

Mailing Address 2701 Winifred

City: Metairie State: LA Zip Code: 70003

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 15.00

**Transaction ID : 4a35d7cb-6b1f-4199-9**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 21.72

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378078

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shanon Snyder

Mailing Address 2701 Winifred

City: Metairie State: LA Zip Code: 70003

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 2.40

**Transaction ID : 903b6b48-08b9-419c-9**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 60.00

**Transaction ID : f8dd60e5-64bc-4714-b**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 62.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378079

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 56.49

**Transaction ID : b42c1872-4dbf-4206-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
James Kindstedt

Mailing Address 5510 Dogwood Dr

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 35.00

**Transaction ID : 9b967cc3-c5ce-4137-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 91.49

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378080

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Kindstedt

Mailing Address 5510 Dogwood Dr

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 11.76

**Transaction ID : da5730b1-777f-47f4-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joanna Kindstedt

Mailing Address 2134 Tobaccoville Rd

City: Rural Hall State: NC Zip Code: 27045

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 35.00

**Transaction ID : 895126a2-e05e-4f73-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 46.76

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378081

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nicole N Ball

Mailing Address 2528 Mill Creek Rd

City Newport State NC Zip Code 28570

Purpose of Expenditure Salary

Category/Type 001

Date of Public Distribution/Dissemination 08 / 14 / 2014

Amount 20.00

**Transaction ID : 5128a2e7-9f87-4613-9**

Date of Disbursement or Obligation 08 / 14 / 2014

Name of Federal Candidate Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nicole N Ball

Mailing Address 2528 Mill Creek Rd

City Newport State NC Zip Code 28570

Purpose of Expenditure Mileage

Category/Type 002

Date of Public Distribution/Dissemination 08 / 14 / 2014

Amount 12.60

**Transaction ID : c60d74e3-bd53-4d31-8**

Date of Disbursement or Obligation 08 / 14 / 2014

Name of Federal Candidate Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 32.60

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378082

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 35.00

**Transaction ID : e5d3623a-7601-49c3-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 9.60

**Transaction ID : f717a5b6-94ae-4cb7-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 44.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gabriella E Hansen

Mailing Address 310 West Meath Drive

City Winterville | State NC | Zip Code 28590

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
25.00

**Transaction ID : e26cb811-834e-4954-b**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Morgan R Padgett

Mailing Address 2164 Kay Rd

City Greenville | State NC | Zip Code 27858

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
25.00

**Transaction ID : 63f2690c-11dd-47d4-b**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 50.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378084

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Morgan R Padgett

Mailing Address 2164 Kay Rd

City Greenville | State NC | Zip Code 27858

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
9.60

**Transaction ID : fa36f68f-0ac8-44f6-9**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jodi Fountain

Mailing Address 1010 S Dogwood Drive

City Bogalusa | State LA | Zip Code 70427

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
35.00

**Transaction ID : 56a4996d-127e-454a-9**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 44.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378085

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jodi Fountain

Mailing Address 1010 S Dogwood Drive

City: Bogalusa State: LA Zip Code: 70427

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 9.00

**Transaction ID : d69221f4-27a0-4af9-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Theresa a Youngblood

Mailing Address 102 S Main Street Apt A2

City: Berryville State: VA Zip Code: 22611

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 40.00

**Transaction ID : bfaf226b-2e24-4040-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 49.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378086

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shantal C Culbreath

Mailing Address 4691 Hercules Lane

City Woodbridge State VA Zip Code 22193

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
80.00

**Transaction ID : dd4cc60c-697f-4056-b**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City Newport State NC Zip Code 28570

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
33.00

**Transaction ID : 3e70fd6c-f123-471a-9**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 113.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378087

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City Newport | State NC | Zip Code 28570

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
8.28

**Transaction ID : 69d2cb4a-6062-4b70-a**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City Spruce Pine | State NC | Zip Code 28777

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
40.00

**Transaction ID : 92ffa5bf-5d6a-43e3-b**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 48.28

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 23.40

**Transaction ID : bdf2e63b-3930-4614-b**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 40.00

**Transaction ID : ad1ceab8-8832-45d2-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 63.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378089

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 23.40

**Transaction ID : c4cd130c-bdd3-46fe-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City: Shelby State: NC Zip Code: 28152

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 55.00

**Transaction ID : 071f1cc9-c38a-4b75-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 78.40

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378090

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City Shelby | State NC | Zip Code 28152

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
23.40

**Transaction ID : 44f504cd-f625-4a53-9**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Laura U Logie

Mailing Address 2565 Shire Circle

City Harrisonburg | State VA | Zip Code 22801

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
20.00

**Transaction ID : f0c1c6bf-c641-4d56-9**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 43.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378091

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Allie Butler

Mailing Address 1676 Shady Creek Rd

City: Ayden State: NC Zip Code: 28513

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 30.00

**Transaction ID : 69d24b1c-ff73-4067-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Jennie Butler

Mailing Address 1676 Shady Creek Rd

City: Ayden State: NC Zip Code: 28513

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 28.00

**Transaction ID : fdfb5d7b-9301-44b5-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 58.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378092

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jennie Butler

Mailing Address 1676 Shady Creek Rd

City: Ayden State: NC Zip Code: 28513

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 24.42

**Transaction ID : 48b58bb0-7000-474d-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Antoinette Franklin

Mailing Address 8822 Apple St

City: New Orleans State: LA Zip Code: 70188

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 70.00

**Transaction ID : 3a5e35dd-55e0-409b-b**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 94.42

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378093

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Antoinette Franklin

Mailing Address 8822 Apple St

City: New Orleans State: LA Zip Code: 70188

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 13.50

**Transaction ID : e81d8ca1-cb79-4eed-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 70.00

**Transaction ID : d8add9a5-f61f-4fd2-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 83.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378094

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 12.90

**Transaction ID : 452f395b-fd1e-4c16-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Stephanie L Heun

Mailing Address 8026 S Wilwood Dr Apt 101

City: Oak Creek State: WI Zip Code: 53154

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 31.70

**Transaction ID : 31d47b6f-2845-4519-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 44.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378095

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carmen Maddrey

Mailing Address 2043 Nottingham Ln

City: Burlington State: NC Zip Code: 27215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 65.00

**Transaction ID : 77fdb5fa-2492-4255-b**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carmen Maddrey

Mailing Address 2043 Nottingham Ln

City: Burlington State: NC Zip Code: 27215

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 7.20

**Transaction ID : 9d91d03c-e233-4ca6-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 72.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378096

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Morgan E Hallenbeck

Mailing Address 3790 Christian Light Rd

City: Fuquay Varina State: NC Zip Code: 27526

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 70.00

**Transaction ID : 78129f6c-162e-40d8-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Morgan E Hallenbeck

Mailing Address 3790 Christian Light Rd

City: Fuquay Varina State: NC Zip Code: 27526

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 23.01

**Transaction ID : ee537fde-5adc-4182-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 93.01

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378097

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Pollreis

Mailing Address 15.5 Magnolia Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
30.00

**Transaction ID : 3a1c4f58-24c7-4f52-b**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Pollreis

Mailing Address 15.5 Magnolia Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
13.50

**Transaction ID : 63a22080-81d5-4b1d-b**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 43.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378098

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Theresa A Touchet

Mailing Address 102 French Street #3

City: New Orleans State: LA Zip Code: 70124

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 10.60

**Transaction ID : d262c8dd-26b7-40d7-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Theresa A Touchet

Mailing Address 102 French Street #3

City: New Orleans State: LA Zip Code: 70124

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 0.30

**Transaction ID : cb6adf4e-aaf0-4070-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 10.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378099

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joseph P Thierfelder
Previously filed under the name Pthierfelder

Mailing Address 2411 Armstrong

City: Gastonia State: NC Zip Code: 28054

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 100.00

**Transaction ID : 5e828b08-fa89-4549-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joseph P Thierfelder
Previously filed under the name Pthierfelder

Mailing Address 2411 Armstrong

City: Gastonia State: NC Zip Code: 28054

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 7.50

**Transaction ID : c0f9040d-4e56-4e82-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 107.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378100

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Barbara A Williams

Mailing Address
3002 Darden Rd
Apt A

City: Greensboro
State: NC
Zip Code: 27407

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 60.00

**Transaction ID : 999d780c-f7a2-4df4-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joseph R Rys

Mailing Address
160 #50 Pompano Dr

City: New Bern
State: NC
Zip Code: 28560

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 50.00

**Transaction ID : 77dac65f-8a26-425e-b**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 110.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 7.26

**Transaction ID : f21b4c0a-adc7-45d8-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Elizabeth DeMaine

Mailing Address 75 Stephenson Ln

City: Sheridan State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 35.00

**Transaction ID : 6ed59ee9-af2d-4d13-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 42.26

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378102

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Elizabeth DeMaine

Mailing Address 75 Stephenson Ln

City Sheridan | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
23.10

**Transaction ID : 851a2568-a2ff-4338-a**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Dylan Simon

Mailing Address 111 Millrock Drive

City Lafayette | State LA | Zip Code 70508

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
48.83

**Transaction ID : e42896f7-12cd-4e95-b**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 71.93

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Dylan Simon

Mailing Address 111 Millrock Drive

City Lafayette | State LA | Zip Code 70508

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
22.41

**Transaction ID : c922addd-4263-4ca3-b**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City Bellaire | State NC | Zip Code 77401

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
80.00

**Transaction ID : 677680fb-dd5c-46fb-8**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 102.41

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378104

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 10.50

**Transaction ID : d8198af5-f889-498d-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City: Spindale State: NC Zip Code: 28160

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 82.50

**Transaction ID : b1ffbd8c-274f-4d8e-b**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 93.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378105

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City: Spindale State: NC Zip Code: 28160

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 28.92

**Transaction ID : 6f4ae3b2-e254-43d1-b**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 30.00

**Transaction ID : e91a2847-29fe-4822-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 58.92

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378106

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 36.90

**Transaction ID : 57697f45-c63f-45a3-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Cory Bryson

Mailing Address 216 Dogwood Ln

City: Belmont State: NC Zip Code: 28012

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 60.00

**Transaction ID : 0020c2ce-7ad6-4d9c-b**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 96.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378107

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Cory Bryson

Mailing Address 216 Dogwood Ln

City Belmont | State NC | Zip Code 28012

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
4.50

**Transaction ID : 9889a4f4-a5c5-472c-a**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kati M Holland

Mailing Address 248 La Salle St

City Wilmington | State NC | Zip Code 28411

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
40.00

**Transaction ID : 365a013a-f705-4b75-b**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 44.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378108

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kassidy L Tyer

Mailing Address 41 Hawk Hollow Trail

City: Burgaw State: NC Zip Code: 28425

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 45.00

**Transaction ID : d67f9bdc-bb18-47dc-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kassidy L Tyer

Mailing Address 41 Hawk Hollow Trail

City: Burgaw State: NC Zip Code: 28425

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 25.50

**Transaction ID : a262e974-d65a-4b02-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 70.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378109

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City Search | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
55.00

**Transaction ID : a7a8eddf-23c8-49cc-b**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City Search | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
14.49

**Transaction ID : bed37e0e-43ae-4b04-a**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 69.49

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378110

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
80.00

**Transaction ID : c714c76b-518c-43b8-b**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
19.20

**Transaction ID : 5fde8d42-5212-4589-b**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 99.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378111

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lesley Lennox

Mailing Address 2305 Cleary Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 20.00

**Transaction ID : 63866224-14c3-42ea-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lesley Lennox

Mailing Address 2305 Cleary Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 2.10

**Transaction ID : 41385ccd-16dc-431c-b**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 22.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378112

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Buchanan

Mailing Address 1090 McHone Rd

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 75.00

**Transaction ID : 588dc10e-c598-415a-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Casey Stockton

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 75.00

**Transaction ID : fe9f570f-9ce7-44b4-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 150.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378113

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Casey Stockton

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 27.30

**Transaction ID : b5f7cdba-9cfe-482b-b**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mary Johnson

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 75.00

**Transaction ID : 88fe9212-752a-4938-b**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 102.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378114

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Barbara E Spritz

Mailing Address 3346 Durham St Ext

City: Burlington State: NC Zip Code: 27217

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 40.00

**Transaction ID : 20ae7cc2-bb0e-4c4d-b**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Barbara E Spritz

Mailing Address 3346 Durham St Ext

City: Burlington State: NC Zip Code: 27217

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 3.30

**Transaction ID : 03bd3fe0-e48f-4a50-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 43.30

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378115

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francesca Blom

Mailing Address 101 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 80.00

**Transaction ID : e4b5ec84-b99d-4b68-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 65.00

**Transaction ID : db5c032c-626f-480e-b**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 145.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378116

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 32.40

**Transaction ID : 27743fad-5cfb-4bf7-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eric J Smith

Mailing Address 4967 Dysartville

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 80.00

**Transaction ID : 08303cf0-fa8c-4b91-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 112.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378117

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 80.00

**Transaction ID : 00a6f041-5489-447d-b**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 10.50

**Transaction ID : f09344e0-8b38-40eb-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 90.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378118

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Marysol Netro

Mailing Address 312 S Gunter St

City: Siloam Springs State: AR Zip Code: 72761

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 100.00

**Transaction ID : 38dbfe53-25a3-42a2-b**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Marysol Netro

Mailing Address 312 S Gunter St

City: Siloam Springs State: AR Zip Code: 72761

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 6.00

**Transaction ID : 060e371a-81fc-441c-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 106.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378119

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 60.00

**Transaction ID : 98d7be85-63a3-4d5d-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 15.21

**Transaction ID : a72dd3a3-b0e5-4392-b**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 75.21

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378120

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Courtney Goldstein

Mailing Address 1809 N Woodlawn

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 45.00

**Transaction ID : 68f61251-2d20-4212-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Courtney Goldstein

Mailing Address 1809 N Woodlawn

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 4.80

**Transaction ID : 1ac93aa1-46aa-4e1b-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 49.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378121

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 35.00

**Transaction ID : 93a2c064-5273-4bb9-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 2.52

**Transaction ID : 1a52ac50-6c95-4331-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 37.52

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378122

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City: Kenner State: LA Zip Code: 70065

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 40.00

**Transaction ID : a1741c72-80ed-465a-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City: Kenner State: LA Zip Code: 70065

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 8.76

**Transaction ID : e4322e99-24d0-468b-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 48.76

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378123

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 60.00

**Transaction ID : 62766423-6d87-43dd-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 33.60

**Transaction ID : ab512822-b2b9-4bb7-b**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 93.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378124

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carey T Henderson

Mailing Address 1025 Inverness Rd

City: Suthern Pines State: NC Zip Code: 28387

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 60.00

**Transaction ID : deb33863-352b-4308-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carey T Henderson

Mailing Address 1025 Inverness Rd

City: Suthern Pines State: NC Zip Code: 28387

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 5.10

**Transaction ID : e1ffdc04-835b-42d2-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 65.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378125

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 40.00

**Transaction ID : 3020f369-5b89-4d17-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 3.90

**Transaction ID : 3404fb11-7062-4f3c-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 43.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378126

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 40.00

**Transaction ID : d7046247-7ae7-4b62-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 7.20

**Transaction ID : 9cc994b6-b388-4df4-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 47.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378127

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 100.00

**Transaction ID : 5cee2714-99b4-44ea-b**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 13.80

**Transaction ID : e237e627-8dc3-40db-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 113.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378128

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
100.00

**Transaction ID : 331522b6-d610-4caf-9**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
27.30

**Transaction ID : 3e65b532-54bd-4acf-a**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 127.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378129

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Taylor N Randall

Mailing Address
2002 E Park Ave
Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 70.00

**Transaction ID : 5f62e85b-eba7-41ae-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shelbi L Randall

Mailing Address
202 East Park Ave Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 70.00

**Transaction ID : 44075967-4549-4fce-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 140.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shelbi L Randall

Mailing Address 202 East Park Ave Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 19.62

**Transaction ID : cffb86c7-20d0-4900-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 70.00

**Transaction ID : 00aa6307-e00c-4baa-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.62

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378131

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 29.40

**Transaction ID : 0cb9adb5-f1c2-4760-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shantal C Culbreath

Mailing Address 4691 Hercules Lane

City: Woodbridge State: VA Zip Code: 22193

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 60.00

**Transaction ID : c5c96fd5-86e2-4aca-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.40

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378132

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tarrin Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 70.00

**Transaction ID : 1e2b6096-95a6-41b8-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tarrin Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 6.00

**Transaction ID : daf69688-fb5d-4ff8-b**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 76.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378133

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brandon Guttuso

Mailing Address 3013 Transcontinental Dr

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 70.00

**Transaction ID : 4bd4a55f-1be2-439f-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brandon Guttuso

Mailing Address 3013 Transcontinental Dr

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 6.00

**Transaction ID : 6be01b81-63ce-4649-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 76.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378134

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Roger McKinney

Mailing Address 308 West Main Street

City: Pilot Mountian State: NC Zip Code: 27041

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 42.50

**Transaction ID : 24c3ed1c-6034-4fc5-b**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Mr. Roger McKinney

Mailing Address 308 West Main Street

City: Pilot Mountian State: NC Zip Code: 27041

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 10.38

**Transaction ID : 63439373-f3dc-48fb-b**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 52.88

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378135

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Glenda McKinney

Mailing Address 308 West Main Street

City: Plot Mountain State: NC Zip Code: 27041

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 42.50

**Transaction ID : efb58c93-9a0e-47fb-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 35.00

**Transaction ID : 64c5d4c7-4ff2-40b4-b**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 77.50

**(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378136

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 7.50

**Transaction ID : 12b52a91-e9ec-4b9e-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Evelyn Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 70.00

**Transaction ID : 2e1848a7-7593-40a1-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 77.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Evelyn Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 6.00

**Transaction ID : 2090727e-d27b-4534-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Theresa a Youngblood

Mailing Address 102 S Main Street Apt A2

City: Berryville State: VA Zip Code: 22611

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 70.00

**Transaction ID : c83939e9-5ce6-4d5e-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 76.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 80.00

**Transaction ID : 72775497-40a1-458f-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 80.00

**Transaction ID : 12978ef7-2a19-4fa3-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 160.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378139

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney D Culbreth

Date of Public Distribution/Dissemination
08 / 14 / 2014

Mailing Address
100 Asbury CT
3200 Dam Neck Rd

Amount
70.00

City: Winchester
State: VA
Zip Code: 22602

**Transaction ID : 77f21532-86fe-4583-a**

Purpose of Expenditure
Salary

Category/Type: 001

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rze Culbreath

Date of Public Distribution/Dissemination
08 / 14 / 2014

Mailing Address
100 Asbury Ct

Amount
70.00

City: Winchester
State: VA
Zip Code: 22602

**Transaction ID : b43f043a-24f1-4888-9**

Purpose of Expenditure
Salary

Category/Type: 001

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 140.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378140

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City Winchester | State VA | Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
60.00

**Transaction ID : ae7502da-2e2a-40fb-a**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro | State NC | Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
70.00

**Transaction ID : cdb0e6f6-b5de-4900-a**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 130.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378141

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
21.60

**Transaction ID : d653413a-0d11-4462-b**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Beverly Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
70.00

**Transaction ID : b238e2f4-f6f9-429e-8**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 91.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378142

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 110.00

**Transaction ID : fdc8d820-29a0-4a8a-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 33.00

**Transaction ID : a58a83ee-ecf6-4623-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 143.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378143

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City: Sterling State: VA Zip Code: 20165

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 20.00

**Transaction ID : 76f7e17d-7bc8-4c53-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City: Sterling State: VA Zip Code: 20165

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 20.00

**Transaction ID : 2adde9f3-9cf3-4c1e-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 40.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378144

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
45.00

**Transaction ID : 95dd3916-c1ab-4db0-8**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
15.30

**Transaction ID : f46e8ff6-ec3f-47c9-9**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 60.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378145

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 110.00

**Transaction ID : 67885ea3-7370-4c1f-9**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 33.00

**Transaction ID : e10a5e54-8595-4339-a**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 143.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378146

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Wayne Burckel

Mailing Address 46 Glenwood Ave

City Harahan | State LA | Zip Code 70123

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
50.00

**Transaction ID : 24d76450-455f-4766-b**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Wayne Burckel

Mailing Address 46 Glenwood Ave

City Harahan | State LA | Zip Code 70123

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
0.30

**Transaction ID : 8de6bd94-78a6-42e9-b**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 50.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378147

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 112.50

**Transaction ID : 56cecbf8-e142-4c2c-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 16.80

**Transaction ID : 8c3a9472-323f-4cc5-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 129.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378148

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 110.00

**Transaction ID : 4cd432d4-6b9a-4b38-8**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 14 / 2014

Amount: 15.30

**Transaction ID : 6019e4d7-c8e5-4fdd-b**

Date of Disbursement or Obligation: 08 / 14 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 125.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
All State Banners

Mailing Address 35-11 9th Street

City: Long Island City | State: NY | Zip Code: 11106

Purpose of Expenditure: Campaign materials

Category/Type: 006

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 380.70

**Transaction ID : f9eea5c6-6dd6-4071-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Laura U Logie

Mailing Address 2565 Shire Circle

City: Harrisonburg | State: VA | Zip Code: 22801

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 10.00

**Transaction ID : 4d324724-3a01-4415-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 390.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378150

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Felice Barrett

Mailing Address 1588 Asbury

City: Springdale State: AR Zip Code: 72762

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 20.00

**Transaction ID : b19a2ec7-a3c9-4638-8**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Felice Barrett

Mailing Address 1588 Asbury

City: Springdale State: AR Zip Code: 72762

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 9.81

**Transaction ID : 6c335ddf-d46f-429e-9**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 29.81

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378151

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mattie Harris

Mailing Address 3654 Tara St

City springdale State AR Zip Code 72762

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
20.00

**Transaction ID : e862b9b7-c88d-44c3-b**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Mattie Harris

Mailing Address 3654 Tara St

City springdale State AR Zip Code 72762

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
1.80

**Transaction ID : 1e8e5917-b194-4af2-a**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 21.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378152

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Kindstedt

Mailing Address 5510 Dogwood Dr

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 21.50

**Transaction ID : 2c1d5dda-fe80-4578-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James Kindstedt

Mailing Address 5510 Dogwood Dr

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 11.10

**Transaction ID : 0fc38657-de79-4b6b-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 32.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378153

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joanna Kindstedt

Mailing Address 2134 Tobaccoville Rd

City: Rural Hall State: NC Zip Code: 27045

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 22.50

**Transaction ID : 7a906536-7b2d-4ba0-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
David M Bozeman

Mailing Address 768 Pine Haven Drive

City: Fayetteville State: NC Zip Code: 28306

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 12.50

**Transaction ID : 47609d5f-b347-4f97-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 35.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378154

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David M Bozeman

Mailing Address 768 Pine Haven Drive

City: Fayetteville State: NC Zip Code: 28306

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 0.90

**Transaction ID : fdf87a51-b813-4d31-b**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ky Broussard

Mailing Address 301 N Cedar Street

City: Abbeville State: LA Zip Code: 70510

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 30.00

**Transaction ID : 3362085f-5d3c-4474-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 30.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378155

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ky Broussard

Mailing Address 301 N Cedar Street

City Abbeville State LA Zip Code 70510

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
22.50

**Transaction ID : d508551f-da36-4298-a**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Dwayne C Smith

Mailing Address 900 Bramblegate Rd

City Hope Mills State NC Zip Code 28348

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
25.00

**Transaction ID : a7925de3-f21b-4d33-9**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 47.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378156

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Dwayne C Smith

Mailing Address 900 Bramblegate Rd

City Hope Mills State NC Zip Code 28348

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination 08 / 15 / 2014

Amount 4.92

**Transaction ID : cb2d7131-a7f5-40ad-9**

Date of Disbursement or Obligation 08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lisa Miller

Mailing Address 718 Azalea Dr.
Unit 453

City Hampstead State NC Zip Code 28443

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination 08 / 15 / 2014

Amount 23.00

**Transaction ID : bb207a6f-b570-403a-9**

Date of Disbursement or Obligation 08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 27.92

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378157

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Miller

Date of Public Distribution/Dissemination
08 / 15 / 2014

Mailing Address
718 Azalea Dr.
Unit 453

Amount
6.69

City: Hampstead
State: NC
Zip Code: 28443

**Transaction ID : a3cb0700-7a0f-4798-8**

Purpose of Expenditure
Mileage

Category/Type: 002

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Anthony Pearson

Date of Public Distribution/Dissemination
08 / 15 / 2014

Mailing Address
112 apache Dr

Amount
35.00

City: Search
State: AR
Zip Code: 72149

**Transaction ID : 98b916fd-831c-40db-a**

Purpose of Expenditure
Salary

Category/Type: 001

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 41.69

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378158

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City: Search | State: AR | Zip Code: 72149

Purpose of Expenditure: Mileage | Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 7.35

**Transaction ID : 7660b560-2cf5-437f-b**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock | State: AR | Zip Code: 72116

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 30.00

**Transaction ID : 85c1aec8-26e7-4b3c-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 37.35

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378159

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 13.02

**Transaction ID : 6b774a12-8150-4a7a-9**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Morgan E Hallenbeck

Mailing Address 3790 Christian Light Rd

City: Fuquay Varina State: NC Zip Code: 27526

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 70.00

**Transaction ID : c87ad9ac-e8ae-47cf-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 83.02

**(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378160

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Morgan E Hallenbeck

Mailing Address 3790 Christian Light Rd

City: Fuquay Varina State: NC Zip Code: 27526

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 36.90

**Transaction ID : ed381332-250b-459a-9**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 55.00

**Transaction ID : 7b33c580-5225-4713-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 91.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378161

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 8.16

**Transaction ID : 32fd5767-30f4-41be-9**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Earl Stewart

Mailing Address 9455 Snow Camp Road

City: Snowcamp State: NC Zip Code: 27349

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 90.00

**Transaction ID : 9457ede3-e352-4bf0-9**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 98.16

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Earl Stewart

Mailing Address 9455 Snow Camp Road

City: Snowcamp State: NC Zip Code: 27349

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 8.40

**Transaction ID : 26aca970-e89b-41ac-b**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City: Shelby State: NC Zip Code: 28152

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 44.00

**Transaction ID : 3db371a2-e855-4f3a-b**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 52.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378163

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City: Shelby State: NC Zip Code: 28152

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 26.40

**Transaction ID : ffed53a1-497d-43d5-8**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Barbara E Spritz

Mailing Address 3346 Durham St Ext

City: Burlington State: NC Zip Code: 27217

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 40.00

**Transaction ID : 403af8a7-7209-41b9-b**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 66.40

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Barbara E Spritz

Mailing Address 3346 Durham St Ext

City: Burlington State: NC Zip Code: 27217

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 5.10

**Transaction ID : b5544e84-713d-4b50-8**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 90.00

**Transaction ID : 6d8fb8d2-4099-4bce-8**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 95.10

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378165

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 11.70

**Transaction ID : e5436c04-16f0-42f1-9**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shantal C Culbreath

Mailing Address 4691 Hercules Lane

City: Woodbridge State: VA Zip Code: 22193

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 80.00

**Transaction ID : 0eacaf59-ee2a-458b-9**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 91.70

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378166

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christine B Long

Mailing Address 3121 Charleycote Dr

City Raleigh | State NC | Zip Code 27614

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
40.00

**Transaction ID : 1218aae7-93b6-4541-9**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Christine B Long

Mailing Address 3121 Charleycote Dr

City Raleigh | State NC | Zip Code 27614

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
13.80

**Transaction ID : fa227a06-8f08-469d-b**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 53.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378167

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City Spindale State NC Zip Code 28160

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
52.50

**Transaction ID : 87324f8f-d34c-4e5d-a**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City Spindale State NC Zip Code 28160

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
10.20

**Transaction ID : fb791dd0-820b-42bd-a**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 62.70

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378168

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 24.00

**Transaction ID : 9706d995-7fef-4950-9**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 14.91

**Transaction ID : 0ba3fc33-0c2a-4682-9**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 38.91

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378169

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 80.00

**Transaction ID : 526635af-ee36-41c8-b**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 33.09

**Transaction ID : b5c20f2b-a922-4957-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 113.09

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378170

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lourdes Lopez

Mailing Address 2936 Brushwood Ave

City: Springdale State: AR Zip Code: 72764

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 30.00

**Transaction ID : ccdeb225-ea54-4437-8**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lourdes Lopez

Mailing Address 2936 Brushwood Ave

City: Springdale State: AR Zip Code: 72764

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 9.00

**Transaction ID : ca974355-b194-460f-b**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 39.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378171

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City Newport | State NC | Zip Code 28570

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
30.00

**Transaction ID : f21a0d6f-76d1-4693-9**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City Newport | State NC | Zip Code 28570

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
6.78

**Transaction ID : 5e2ae191-eb15-411c-b**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 36.78

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378172

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Roger McKinney

Mailing Address 308 West Main Street

City: Pilot Mountian State: NC Zip Code: 27041

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 75.00

**Transaction ID : da4419ac-bfa2-43a0-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mr. Roger McKinney

Mailing Address 308 West Main Street

City: Pilot Mountian State: NC Zip Code: 27041

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 14.76

**Transaction ID : 56c1dc8b-d3d3-41d2-9**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 89.76

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378173

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danelle M Hallenbeck

Mailing Address 2103 Millcroft Rd

City: Pleasant Garden State: NC Zip Code: 27313

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 65.00

**Transaction ID : a19d8ff3-2320-4a18-b**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Danelle M Hallenbeck

Mailing Address 2103 Millcroft Rd

City: Pleasant Garden State: NC Zip Code: 27313

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 48.30

**Transaction ID : 187f2d3d-14a0-4522-8**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 113.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378174

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Elizabeth DeMaine

Mailing Address 75 Stephenson Ln

City Sheridan | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
20.00

**Transaction ID : 58d85160-4697-4daf-8**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Elizabeth DeMaine

Mailing Address 75 Stephenson Ln

City Sheridan | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
16.20

**Transaction ID : af5f9adb-e9df-405b-9**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 36.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378175

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francesca Blom

Mailing Address 101 Asbury Ct

City Winchester | State VA | Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
80.00

**Transaction ID : 9febadad-f997-4424-9**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Barbara A Williams

Mailing Address 3002 Darden Rd
Apt A

City Greensboro | State NC | Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
100.00

**Transaction ID : e4866ad2-7123-43aa-9**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 180.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378176

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City: Kenner State: LA Zip Code: 70065

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 50.00

**Transaction ID : 7390d47d-8f0f-4e97-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City: Kenner State: LA Zip Code: 70065

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 8.88

**Transaction ID : 359c6ecb-f896-4f9c-b**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 58.88

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378177

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Cory Bryson

Mailing Address 216 Dogwood Ln

City Belmont | State NC | Zip Code 28012

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
70.00

**Transaction ID : f520b603-1bd8-4b2f-a**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Cory Bryson

Mailing Address 216 Dogwood Ln

City Belmont | State NC | Zip Code 28012

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
21.00

**Transaction ID : 35255147-6268-477d-8**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 91.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378178

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carmen Maddrey

Mailing Address 2043 Nottingham Ln

City: Burlington State: NC Zip Code: 27215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 40.00

**Transaction ID : 3df10d4a-94b3-46e7-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carmen Maddrey

Mailing Address 2043 Nottingham Ln

City: Burlington State: NC Zip Code: 27215

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 1.80

**Transaction ID : e831ee62-a23a-45d8-8**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 41.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378179

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Benjamin Hernandez

Mailing Address 915 E Market Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
65.00

**Transaction ID : e6c84a3a-13ce-4fe5-9**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Benjamin Hernandez

Mailing Address 915 E Market Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
16.50

**Transaction ID : d5d42dfe-bd00-49c5-9**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 81.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378180

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Tatro

Date of Public Distribution/Dissemination
08 / 15 / 2014

Mailing Address 1208 Braeburn Rd

Amount
50.00

City: Charlotte State: NC Zip Code: 28211

**Transaction ID : 28f09c5e-debc-467a-9**

Purpose of Expenditure
Salary

Category/Type 001

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James Tatro

Date of Public Distribution/Dissemination
08 / 15 / 2014

Mailing Address 1208 Braeburn Rd

Amount
6.30

City: Charlotte State: NC Zip Code: 28211

**Transaction ID : 9a24f54a-1dd9-4ef6-b**

Purpose of Expenditure
Mileage

Category/Type 002

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 56.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378181

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Jean

Mailing Address 2012 Harrison Ave

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 120.00

**Transaction ID : 26507812-5dd3-4bbd-b**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Steven Jean

Mailing Address 2012 Harrison Ave

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 20.40

**Transaction ID : 5edd5739-9753-4054-b**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 140.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Stephanie L Heun

Mailing Address 8026 S Wilwood Dr Apt 101

City: Oak Creek State: WI Zip Code: 53154

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 40.00

**Transaction ID : c2e98cad-3c9e-4a56-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 65.00

**Transaction ID : 2875b901-acea-4927-9**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 105.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378183

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City Ville Platte | State LA | Zip Code 70586

Purpose of Expenditure Mileage | Category/Type 002

Date of Public Distribution/Dissemination 08 / 15 / 2014

Amount 31.80

**Transaction ID : df739a2f-cedc-4222-9**

Date of Disbursement or Obligation 08 / 15 / 2014

Name of Federal Candidate Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City Ville Platte | State LA | Zip Code 70586

Purpose of Expenditure Salary | Category/Type 001

Date of Public Distribution/Dissemination 08 / 15 / 2014

Amount 65.00

**Transaction ID : 42e67c81-d431-4685-b**

Date of Disbursement or Obligation 08 / 15 / 2014

Name of Federal Candidate Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 96.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378184

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 31.80

**Transaction ID : 21bbd1b5-2a1c-4878-8**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Aaron Credeur

Mailing Address 234 East Musique Rd

City: Carencro State: LA Zip Code: 70520

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 40.00

**Transaction ID : 3dd1760b-8afa-4e0c-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 71.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Aaron Credeur

Mailing Address 234 East Musique Rd

City: Carencro State: LA Zip Code: 70520

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 15.00

**Transaction ID : b1aff398-3082-400b-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City: Sterling State: VA Zip Code: 20165

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 50.00

**Transaction ID : affcb2cf-3dfb-4d11-9**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 65.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378186

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eric J Smith

Mailing Address 4967 Dysartville

City Morganton State NC Zip Code 28655

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
80.00

**Transaction ID : ef41400d-e384-4d29-9**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City Raleigh State NC Zip Code 27610

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
13.00

**Transaction ID : b3c9085a-037a-4119-b**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 93.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378187

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City Raleigh | State NC | Zip Code 27610

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
4.20

**Transaction ID : 3285e56e-de18-482f-9**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City Morganton | State NC | Zip Code 28655

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
80.00

**Transaction ID : 97cf8e40-250f-4b8c-b**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 84.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378188

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City Morganton State NC Zip Code 28655

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
4.50

**Transaction ID : d1fb52fb-819d-4428-a**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City Little Rock State AR Zip Code 72212

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
50.00

**Transaction ID : f09b4b30-6c86-446d-b**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 54.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378189

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 15.60

**Transaction ID : 26f49908-eb5c-4b2b-9**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 50.00

**Transaction ID : db846ea8-20bf-46b6-9**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 65.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378190

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 34.20

**Transaction ID : 4c2ca997-6917-4a08-9**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James W Blevins

Mailing Address 108 East Clinton St
PO Box 410

City: Salemburg State: NC Zip Code: 28385

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 40.00

**Transaction ID : 44702e17-ce99-4b57-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 74.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378191

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James W Blevins

Mailing Address
108 East Clinton St
PO Box 410

City: Salemburg State: NC Zip Code: 28385

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 16.20

**Transaction ID : 7e4c0411-260c-42fc-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Marysol Netro

Mailing Address
312 S Gunter St

City: Siloam Springs State: AR Zip Code: 72761

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 30.00

**Transaction ID : 7b579268-90f4-4eba-9**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 46.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378192

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Marysol Netro

Mailing Address 312 S Gunter St

City: Siloam Springs State: AR Zip Code: 72761

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 2.40

**Transaction ID : 0280015a-9b4c-44b7-b**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joseph P Thierfelder
Previously filed under the name Pthierfelder

Mailing Address 2411 Armstrong

City: Gastonia State: NC Zip Code: 28054

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 100.00

**Transaction ID : 6bf514fb-ca5c-4c88-b**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 102.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378193

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joseph P Thierfelder
Previously filed under the name Pthierfelder

Mailing Address 2411 Armstrong

City: Gastonia State: NC Zip Code: 28054

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 9.30

**Transaction ID : 4e2a7c32-10fc-4a16-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 35.00

**Transaction ID : 375cbfa5-d6e9-41bc-b**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 44.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378194

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 3.51

**Transaction ID : 12fe86fb-9d24-4680-9**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 90.00

**Transaction ID : 6a0c444f-4a6f-47f8-8**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 93.51

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378195

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City Raleigh | State NC | Zip Code 27604

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
8.10

**Transaction ID : e5dc6a50-b208-45b9-a**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City Mandeville | State LA | Zip Code 70471

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
50.00

**Transaction ID : b8096aa5-e3cf-4ed6-b**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 58.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City Mandeville | State LA | Zip Code 70471

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
9.90

**Transaction ID : 12484ec2-27d4-41bb-b**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Steven Jean

Mailing Address 2012 Harrison Ave

City Winston Salem | State NC | Zip Code 27105

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 13 / 2014

Amount
100.00

**Transaction ID : 19d8609c-adfb-4aaa-8**

Date of Disbursement or Obligation
08 / 13 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 109.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378197

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Jean

Mailing Address 2012 Harrison Ave

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 15.00

**Transaction ID : 60cb93cc-605b-4c59-8**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 85.00

**Transaction ID : 4330a70e-7919-4286-9**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 100.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378198

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 15.30

**Transaction ID : 02961409-9dc7-4e22-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 80.00

**Transaction ID : 7da001b9-598f-48f8-9**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 95.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378199

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 15.90

**Transaction ID : 9f131d6f-2432-4457-b**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 90.00

**Transaction ID : d7961f1e-e689-4491-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 105.90

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378200

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 10.50

**Transaction ID : 2ad411bd-6385-4c5a-b**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 80.00

**Transaction ID : 7967fe7d-cd62-4249-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 90.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378201

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City Winchester State VA Zip Code 22602

Purpose of Expenditure Salary

Category/Type 001

Date of Public Distribution/Dissemination 08 / 15 / 2014

Amount 80.00

**Transaction ID : a53fc7de-4bc4-4af0-9**

Date of Disbursement or Obligation 08 / 15 / 2014

Name of Federal Candidate Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rodney D Culbreth

Mailing Address 100 Asbury CT
3200 Dam Neck Rd

City Winchester State VA Zip Code 22602

Purpose of Expenditure Salary

Category/Type 001

Date of Public Distribution/Dissemination 08 / 15 / 2014

Amount 80.00

**Transaction ID : 4c40dcb2-5368-4764-a**

Date of Disbursement or Obligation 08 / 15 / 2014

Name of Federal Candidate Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 160.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378202

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rze Culbreath

Mailing Address 100 Asbury Ct

City Winchester State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
80.00

**Transaction ID : 152a0a35-678c-4c80-9**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City Winchester State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
70.00

**Transaction ID : abb8307a-b828-44ed-9**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 150.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378203

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
60.00

**Transaction ID : b2d4a2e5-98cd-445a-b**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
1.20

**Transaction ID : 466b62e8-7ea3-4a14-8**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 61.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Taylor N Randall

Mailing Address
2002 E Park Ave
Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 70.00

**Transaction ID : 1902e198-ead5-4226-8**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Taylor N Randall

Mailing Address
2002 E Park Ave
Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 20.82

**Transaction ID : 5e2bdd98-bc0e-4fde-8**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 90.82

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shelbi L Randall

Mailing Address 202 East Park Ave Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 70.00

**Transaction ID : e5afc97d-9a4e-4f75-8**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 100.00

**Transaction ID : 6b0e4876-ef9e-451c-9**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 170.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378206

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
23.70

**Transaction ID : 6ea1c399-8961-49b7-b**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
80.00

**Transaction ID : 43441667-1a16-46f9-a**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 103.70

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City: Shreveport State: LA Zip Code: 71104

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 52.50

**Transaction ID : 9e020917-8c4a-4fc6-9**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carey T Henderson

Mailing Address 1025 Inverness Rd

City: Suthern Pines State: NC Zip Code: 28387

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 30.00

**Transaction ID : 11425346-ff0b-4efd-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 82.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378208

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carey T Henderson

Mailing Address 1025 Inverness Rd

City: Suthern Pines State: NC Zip Code: 28387

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 4.20

**Transaction ID : 8d619baa-075a-4620-9**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 45.00

**Transaction ID : d23a08fd-595b-45dd-a**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 49.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378209

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 11.70

**Transaction ID : b5226086-4e51-4b1d-b**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lourdes Lopez

Mailing Address 2936 Brushwood Ave

City: Springdale State: AR Zip Code: 72764

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 30.00

**Transaction ID : f1adc86b-b1f9-4ff1-b**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 41.70

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378210

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lourdes Lopez

Mailing Address 2936 Brushwood Ave

City Springdale State AR Zip Code 72764

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 16 / 2014

Amount
9.00

**Transaction ID : 00cec930-e541-4bf2-a**

Date of Disbursement or Obligation
08 / 16 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Joseph P Thierfelder

Mailing Address 2411 Armstrong

City Gastonia State NC Zip Code 28054

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 16 / 2014

Amount
50.00

**Transaction ID : d5485b50-cc25-48ba-9**

Date of Disbursement or Obligation
08 / 16 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 59.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joseph P Thierfelder

Mailing Address 2411 Armstrong

City: Gastonia State: NC Zip Code: 28054

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 12.90

**Transaction ID : f80a5ed1-38e7-40b2-b**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Jessica Habakjian

Mailing Address 4193 W. Lang St

City: Farmville State: NC Zip Code: 27828

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 45.00

**Transaction ID : 3e25a357-724d-4993-a**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 57.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378212

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jessica Habakjian

Mailing Address 4193 W. Lang St

City: Farmville State: NC Zip Code: 27828

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 8.10

**Transaction ID : 675bfa14-db0a-49bc-b**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Theresa a Youngblood

Mailing Address 102 S Main Street Apt A2

City: Berryville State: VA Zip Code: 22611

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 50.00

**Transaction ID : f0ba4c4e-b522-4a8b-9**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 58.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378213

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Kindstedt

Mailing Address 5510 Dogwood Dr

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 47.50

**Transaction ID : 66550458-2ed2-4d14-b**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James Kindstedt

Mailing Address 5510 Dogwood Dr

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 12.00

**Transaction ID : a2e40747-1240-4ac8-9**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 59.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378214

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joanna Kindstedt

Mailing Address 2134 Tobaccoville Rd

City: Rural Hall State: NC Zip Code: 27045

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 47.50

**Transaction ID : 378903d2-f9d9-4ba3-8**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 80.00

**Transaction ID : 5d79867f-a373-4bc5-9**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 127.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378215

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 12.90

**Transaction ID : 5b8dfdf2-7120-4775-a**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 15.00

**Transaction ID : 2f4d4590-d7c2-468e-a**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 27.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378216

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 1.20

**Transaction ID : 28b1b8a0-c134-43e7-8**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 50.00

**Transaction ID : eba41b8c-1c3b-44d9-b**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 51.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 30.90

**Transaction ID : 7c5d6053-3904-410e-b**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City: Raleigh State: NC Zip Code: 27610

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 30.00

**Transaction ID : 16bf75a9-495b-4238-a**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 60.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378218

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City Raleigh | State NC | Zip Code 27610

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 16 / 2014

Amount
2.70

**Transaction ID : 5d6d2559-8545-4bd3-a**

Date of Disbursement or Obligation
08 / 16 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City Raleigh | State NC | Zip Code 27604

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 16 / 2014

Amount
40.00

**Transaction ID : 8eb6b28c-eef0-47e9-8**

Date of Disbursement or Obligation
08 / 16 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 42.70

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378219

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 6.90

**Transaction ID : dadac737-b0b1-4294-8**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Peter Sahuc

Mailing Address 107 Phillip Ave

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 70.00

**Transaction ID : 3c0b75d9-19b3-4e74-b**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 76.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Peter Sahuc

Mailing Address 107 Phillip Ave

City Lafayette | State LA | Zip Code 70503

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 16 / 2014

Amount
1.62

**Transaction ID : 8f927dd6-3ca5-4d22-9**

Date of Disbursement or Obligation
08 / 16 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City Little Rock | State AR | Zip Code 72205

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 16 / 2014

Amount
35.00

**Transaction ID : 7db191b3-1522-440d-b**

Date of Disbursement or Obligation
08 / 16 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 36.62

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378221

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 26.40

**Transaction ID : ffd35280-2e8c-476a-8**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 28.30

**Transaction ID : add9b07d-abd7-4a2a-b**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 54.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378222

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 16.65

Transaction ID : e9a588ee-03d8-4289-8

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shantal C Culbreath

Mailing Address 4691 Hercules Lane

City: Woodbridge State: VA Zip Code: 22193

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 60.00

Transaction ID : 32c86351-bb3d-4bd8-a

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 76.65

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 16 / 2014

Amount
70.00

**Transaction ID : 40ea928d-2502-4b25-b**

Date of Disbursement or Obligation
08 / 16 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 16 / 2014

Amount
13.80

**Transaction ID : f3623f9d-6a89-4380-a**

Date of Disbursement or Obligation
08 / 16 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 83.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378224

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Billy Martin

Mailing Address 250 JS Brewton rd

City goldonna State LA Zip Code 71031

Purpose of Expenditure Salary

Category/Type 001

Date of Public Distribution/Dissemination 08 / 16 / 2014

Amount 40.00

**Transaction ID : 4e9a3f06-ab6c-48b1-9**

Date of Disbursement or Obligation 08 / 16 / 2014

Name of Federal Candidate Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Billy Martin

Mailing Address 250 JS Brewton rd

City goldonna State LA Zip Code 71031

Purpose of Expenditure Mileage

Category/Type 002

Date of Public Distribution/Dissemination 08 / 16 / 2014

Amount 3.00

**Transaction ID : f79594ce-0376-4538-9**

Date of Disbursement or Obligation 08 / 16 / 2014

Name of Federal Candidate Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 43.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 100.00

**Transaction ID : b3df29d8-8da9-4282-b**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 32.70

**Transaction ID : 7aa69363-b97c-418c-9**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 132.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378226

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City: Sterling State: VA Zip Code: 20165

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 70.00

**Transaction ID : f3ac3cd4-360a-4042-b**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City: Shreveport State: LA Zip Code: 71104

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 40.00

**Transaction ID : 72c9f980-5022-468c-9**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 110.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378227

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 16 / 2014

Amount
13.80

**Transaction ID : b2a45f56-f67e-44ae-a**

Date of Disbursement or Obligation
08 / 16 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jacob S Mann

Mailing Address 3875 Old Stage Rd S

City Erwin State NC Zip Code 28339

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 16 / 2014

Amount
30.00

**Transaction ID : 2fe0ffcf-726d-4e6b-9**

Date of Disbursement or Obligation
08 / 16 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 43.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378228

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jacob S Mann

Mailing Address 3875 Old Stage Rd S

City: Erwin State: NC Zip Code: 28339

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 24.00

**Transaction ID : aca7a6cb-b952-4809-a**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carmen Maddrey

Mailing Address 2043 Nottingham Ln

City: Burlington State: NC Zip Code: 27215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 40.00

**Transaction ID : 2edba95c-0ebb-4a27-9**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 64.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378229

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carmen Maddrey

Mailing Address 2043 Nottingham Ln

City: Burlington State: NC Zip Code: 27215

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 9.00

**Transaction ID : b0814d24-1c8c-475b-9**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 35.00

**Transaction ID : da14a7c5-8cce-442f-9**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 44.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378230

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 8.40

**Transaction ID : 4b046d1d-c305-483f-b**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 30.00

**Transaction ID : b43fc2d0-8426-4f14-8**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 38.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378231

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 1.95

**Transaction ID : 49966622-8efe-4a4f-b**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 50.00

**Transaction ID : 1e9bb6e8-498c-4a19-9**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 51.95

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City Mandeville State LA Zip Code 70471

Purpose of Expenditure Mileage

Category/Type 002

Date of Public Distribution/Dissemination 08 / 16 / 2014

Amount 9.30

**Transaction ID : 28684105-2808-4de9-9**

Date of Disbursement or Obligation 08 / 16 / 2014

Name of Federal Candidate Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure Salary

Category/Type 001

Date of Public Distribution/Dissemination 08 / 16 / 2014

Amount 60.00

**Transaction ID : 23a03d37-de7a-4b9c-a**

Date of Disbursement or Obligation 08 / 16 / 2014

Name of Federal Candidate Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 69.30

(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378233

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 16 / 2014

Amount
16.80

**Transaction ID : 41811336-4ff3-43c2-9**

Date of Disbursement or Obligation
08 / 16 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Xavier Miller

Mailing Address 407 randall Dr

City Searcy State AR Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 16 / 2014

Amount
50.00

**Transaction ID : 64972b49-f697-4672-a**

Date of Disbursement or Obligation
08 / 16 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 66.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Xavier Miller

Mailing Address 407 randall Dr

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 10.20

**Transaction ID : 0114664f-7050-4583-a**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 80.00

**Transaction ID : bf52c719-8832-4fbb-a**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 90.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378235

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 16 / 2014

Amount
29.10

**Transaction ID : a886791a-c12c-4b99-a**

Date of Disbursement or Obligation
08 / 16 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Beverly Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 16 / 2014

Amount
80.00

**Transaction ID : 73e6d90d-3ddc-44f6-a**

Date of Disbursement or Obligation
08 / 16 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 109.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378236

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eric J Smith

Mailing Address 4967 Dysartville

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 80.00

**Transaction ID : bd792484-0479-4199-a**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 80.00

**Transaction ID : aa210252-258b-413e-9**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 160.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378237

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 6.00

**Transaction ID : 3e6f603e-62c9-4cbd-9**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Najib Mahmud

Mailing Address 3432 Riverrock Ct

City: Baton Rouge State: LA Zip Code: 70820

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 60.00

**Transaction ID : 646d07cf-4f66-4592-9**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 66.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378238

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Najib Mahmud

Mailing Address 3432 Riverrock Ct

City: Baton Rouge State: LA Zip Code: 70820

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 5.10

**Transaction ID : 6d599648-19d1-4f2a-9**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ky Broussard

Mailing Address 301 N Cedar Street

City: Abbeville State: LA Zip Code: 70510

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 65.00

**Transaction ID : 73af1ff9-fdd2-4079-a**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 70.10

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 60.00

**Transaction ID : 23f9c065-1b0f-4173-9**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Jazmine d Conner

Mailing Address 100 ASBURY CT

City: WINCHESTER State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 60.00

**Transaction ID : 1a4a0e9f-43e1-4480-a**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 120.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378240

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City Winchester State VA Zip Code 22602

Purpose of Expenditure Salary

Category/Type 001

Date of Public Distribution/Dissemination 08 / 16 / 2014

Amount 60.00

**Transaction ID : 74ec962d-4848-47b1-8**

Date of Disbursement or Obligation 08 / 16 / 2014

Name of Federal Candidate Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City Winchester State VA Zip Code 22602

Purpose of Expenditure Salary

Category/Type 001

Date of Public Distribution/Dissemination 08 / 16 / 2014

Amount 60.00

**Transaction ID : 7ff2cf6a-3f9b-4b6b-a**

Date of Disbursement or Obligation 08 / 16 / 2014

Name of Federal Candidate Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 120.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378241

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney D Culbreth

Mailing Address
100 Asbury CT
3200 Dam Neck Rd

City: Winchester
State: VA
Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 60.00

**Transaction ID : cce75382-c9f7-4fe9-a**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rze Culbreath

Mailing Address
100 Asbury Ct

City: Winchester
State: VA
Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 60.00

**Transaction ID : 0288c3da-be43-4e59-9**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 120.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378242

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Benjamin Hernandez

Mailing Address 915 E Market Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 16 / 2014

Amount
35.00

**Transaction ID : 14de57c5-7734-4acd-9**

Date of Disbursement or Obligation
08 / 16 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Benjamin Hernandez

Mailing Address 915 E Market Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 16 / 2014

Amount
8.40

**Transaction ID : 9e76c26f-f3cb-4d07-8**

Date of Disbursement or Obligation
08 / 16 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 43.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378243

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 70.00

**Transaction ID : f903e913-c12b-4b98-8**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 9.00

**Transaction ID : 22f241ff-4297-436b-8**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 79.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378244

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Dinah Beverly

Mailing Address 157 Bishop Drive

City: Avondale State: LA Zip Code: 70064

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 75.00

**Transaction ID : d3bf166d-483a-4bfd-9**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Dinah Beverly

Mailing Address 157 Bishop Drive

City: Avondale State: LA Zip Code: 70064

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 5.40

**Transaction ID : 2c6abb24-1e82-4c17-a**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 80.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nathan Smith
Originally reported as $1.35, corrected with filing

Mailing Address 1247 W Mt Comfort Rd

City: Fayatteville State: AR Zip Code: 72703

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 4.50

**Transaction ID : 2979a7b0-79b9-4279-8**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nathan Smith
Originally reported as $231, corrected with filing

Mailing Address 1247 W Mt Comfort Rd

City: Fayatteville State: AR Zip Code: 72703

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 6.93

**Transaction ID : 294bfdbb-5423-47e0-b**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 11.43

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378246

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Taylor N Randall

Mailing Address
2002 E Park Ave
Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 110.00

**Transaction ID : ad57e70a-958a-4142-a**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Taylor N Randall

Mailing Address
2002 E Park Ave
Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 25.50

**Transaction ID : 59788641-6dc3-4a2e-9**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 135.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shelbi L Randall

Mailing Address 202 East Park Ave Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 110.00

**Transaction ID : 5859eedc-4f7c-4007-a**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City: METAIRIE State: LA Zip Code: 70003

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 65.00

**Transaction ID : 4e56b3eb-778e-4b5b-9**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 175.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 16 / 2014

Amount
0.90

**Transaction ID : e247fee2-8a61-47f2-9**

Date of Disbursement or Obligation
08 / 16 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City Charlotte State NC Zip Code 23215

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 17 / 2014

Amount
35.00

**Transaction ID : 1fe94a1d-1580-4e1f-b**

Date of Disbursement or Obligation
08 / 17 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 35.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378249

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 17 / 2014

Amount: 7.50

**Transaction ID : 87d09d01-5c0a-41cd-a**

Date of Disbursement or Obligation: 08 / 17 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Billy Martin

Mailing Address 250 JS Brewton rd

City: goldonna State: LA Zip Code: 71031

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 17 / 2014

Amount: 50.00

**Transaction ID : 853d566f-0a9a-4ff9-8**

Date of Disbursement or Obligation: 08 / 17 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 57.50

(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378250

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Billy Martin

Mailing Address 250 JS Brewton rd

City goldonna State LA Zip Code 71031

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 17 / 2014

Amount
4.20

**Transaction ID : d6d1d022-cd6b-40e2-8**

Date of Disbursement or Obligation
08 / 17 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City Bellaire State NC Zip Code 77401

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 17 / 2014

Amount
70.00

**Transaction ID : 40234fe8-f8e3-4be2-8**

Date of Disbursement or Obligation
08 / 17 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 74.20

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378251

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 17 / 2014

Amount: 9.60

**Transaction ID : 073e5935-5a4c-4b5e-8**

Date of Disbursement or Obligation: 08 / 17 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City: METAIRIE State: LA Zip Code: 70003

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 17 / 2014

Amount: 65.00

**Transaction ID : 790f2647-f341-40ca-a**

Date of Disbursement or Obligation: 08 / 17 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 74.60

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378252

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 17 / 2014

Amount
1.20

**Transaction ID : c28397af-656b-4377-8**

Date of Disbursement or Obligation
08 / 17 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City Mandeville State LA Zip Code 70471

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 17 / 2014

Amount
50.00

**Transaction ID : 42760cb5-0cc3-45a5-9**

Date of Disbursement or Obligation
08 / 17 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 51.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378253

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 17 / 2014

Amount: 7.50

**Transaction ID : a0507d38-3986-4178-8**

Date of Disbursement or Obligation: 08 / 17 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City: Shreveport State: LA Zip Code: 71119

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 17 / 2014

Amount: 60.00

**Transaction ID : ac0bf693-161a-4681-9**

Date of Disbursement or Obligation: 08 / 17 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 67.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378254

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport | State LA | Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 17 / 2014

Amount
17.10

**Transaction ID : 4361bb7b-76ed-497e-9**

Date of Disbursement or Obligation
08 / 17 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City New Orleans | State LA | Zip Code 70131

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 17 / 2014

Amount
40.00

**Transaction ID : 4040d4ad-9c3f-4e7f-9**

Date of Disbursement or Obligation
08 / 17 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 57.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378255

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 17 / 2014

Amount: 5.10

**Transaction ID : 4964aacc-673c-49e5-9**

Date of Disbursement or Obligation: 08 / 17 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lourdes Lopez

Mailing Address 2936 Brushwood Ave

City: Springdale State: AR Zip Code: 72764

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 17 / 2014

Amount: 20.00

**Transaction ID : a90e0b91-9704-4de7-8**

Date of Disbursement or Obligation: 08 / 17 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 25.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378256

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lourdes Lopez

Mailing Address 2936 Brushwood Ave

City: Springdale State: AR Zip Code: 72764

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 17 / 2014

Amount: 7.50

**Transaction ID : 90b8bb40-8b78-4005-a**

Date of Disbursement or Obligation: 08 / 17 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Najib Mahmud

Mailing Address 3432 Riverrock Ct

City: Baton Rouge State: LA Zip Code: 70820

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 17 / 2014

Amount: 60.00

**Transaction ID : 3f2aa395-a830-47fb-b**

Date of Disbursement or Obligation: 08 / 17 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 67.50

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378257

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Najib Mahmud

Mailing Address 3432 Riverrock Ct

City: Baton Rouge State: LA Zip Code: 70820

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 17 / 2014

Amount: 5.40

**Transaction ID : 7b14a83a-1bc6-4c77-a**

Date of Disbursement or Obligation: 08 / 17 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mr. Elizabeth Allison

Mailing Address 157 Bishop Drive

City: Avondale State: LA Zip Code: 70094

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 17 / 2014

Amount: 10.00

**Transaction ID : 8662c8b1-0da1-479e-b**

Date of Disbursement or Obligation: 08 / 17 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 15.40

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378258

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Laura Rose Porter

Mailing Address 227 Fairgrounds Road

City: Natchitoches State: LA Zip Code: 71457

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 17 / 2014

Amount: 10.00

**Transaction ID : f9524f3d-8087-49bf-a**

Date of Disbursement or Obligation: 08 / 17 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Laura Rose Porter

Mailing Address 227 Fairgrounds Road

City: Natchitoches State: LA Zip Code: 71457

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 17 / 2014

Amount: 2.40

**Transaction ID : 98c2b015-648a-4948-8**

Date of Disbursement or Obligation: 08 / 17 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 12.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378259

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nathan Smith

Mailing Address 1247 W Mt Comfort Rd

City: Fayatteville State: AR Zip Code: 72703

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 17 / 2014

Amount: 52.00

**Transaction ID : 172cc964-578a-4cf4-8**

Date of Disbursement or Obligation: 08 / 17 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nathan Smith

Mailing Address 1247 W Mt Comfort Rd

City: Fayatteville State: AR Zip Code: 72703

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 17 / 2014

Amount: 8.22

**Transaction ID : 91b2a96b-14d1-44a0-a**

Date of Disbursement or Obligation: 08 / 17 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 60.22

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378260

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 17 / 2014

Amount: 70.00

**Transaction ID : 91397d8e-ede3-4b4e-9**

Date of Disbursement or Obligation: 08 / 17 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 17 / 2014

Amount: 20.40

**Transaction ID : 22e41644-490e-4f3e-8**

Date of Disbursement or Obligation: 08 / 17 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 90.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378261

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 17 / 2014

Amount: 65.00

**Transaction ID : d62eea3b-e81e-4e14-a**

Date of Disbursement or Obligation: 08 / 17 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 17 / 2014

Amount: 18.30

**Transaction ID : de551e50-22dd-4ef3-9**

Date of Disbursement or Obligation: 08 / 17 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 83.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378262

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Design 4 Advertising, Inc.

Mailing Address 106 N Collins St

City Plant City | State FL | Zip Code 33563

Purpose of Expenditure
Design

Category/Type 004

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
150.00

**Transaction ID : b6245b36-8fe5-42d7-b**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Design 4 Advertising, Inc.

Mailing Address 106 N Collins St

City Plant City | State FL | Zip Code 33563

Purpose of Expenditure
Design

Category/Type 004

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
150.00

**Transaction ID : 8ad94f4f-b764-4864-b**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 300.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Design 4 Advertising, Inc.

Mailing Address 106 N Collins St

City: Plant City State: FL Zip Code: 33563

Purpose of Expenditure: Design
Category/Type: 004

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 150.00

**Transaction ID : fbaa0abb-c36c-4462-9**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Casey Stockton

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 50.00

**Transaction ID : 98c2196a-5fd2-4737-a**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 200.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Casey Stockton

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 17.10

**Transaction ID : 50a02826-624f-4302-b**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mary Johnson

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 50.00

**Transaction ID : 7a409daf-9bd4-4f52-9**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 67.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378265

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 40.00

**Transaction ID : 745ad002-b1f9-43db-8**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 9.60

**Transaction ID : e90e3686-02af-4a4f-b**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 49.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378266

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
32.50

**Transaction ID : 81295540-31f8-4082-a**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
15.90

**Transaction ID : e46d1078-5d50-4fbc-a**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 48.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378267

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City: Newport State: NC Zip Code: 28570

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 30.00

**Transaction ID : afe92a49-5c08-40b9-9**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City: Newport State: NC Zip Code: 28570

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 11.19

**Transaction ID : 0fc16be6-1ea7-4ef3-8**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 41.19

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Laura U Logie

Mailing Address 2565 Shire Circle

City Harrisonburg State VA Zip Code 22801

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
20.00

**Transaction ID : 65848276-d3b0-4f2a-a**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Michael Chinchar

Mailing Address 2730 Dave Ward Dr

City Conway State AR Zip Code 72034

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
50.00

**Transaction ID : e948fa3b-14b8-49dd-9**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 70.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Chinchar

Mailing Address 2730 Dave Ward Dr

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 6.60

**Transaction ID : efdbcb0e-f6f5-416c-b**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Adam Rock

Mailing Address 307 Farris Rd Apt 1

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 50.00

**Transaction ID : 8e228a1b-fd6b-41d3-9**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 56.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Adam Rock

Mailing Address 307 Farris Rd Apt 1

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 5.40

**Transaction ID : 098164a4-7dcf-41ef-9**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 50.00

**Transaction ID : 52cfdb93-c558-41fa-9**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 55.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 22.20

**Transaction ID : b919ac60-a4b8-450a-b**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 50.00

**Transaction ID : 49407ffc-af0c-4c24-9**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 72.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 22.20

**Transaction ID : edf5f8e5-86bd-41e6-9**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought: 1095959.94

Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

Full Name of Payee
Jacob S Mann

Mailing Address 3875 Old Stage Rd S

City: Erwin State: NC Zip Code: 28339

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 70.00

**Transaction ID : 82815289-aa87-41fa-8**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought: 1095959.94

Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 92.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378273

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jacob S Mann

Mailing Address 3875 Old Stage Rd S

City: Erwin State: NC Zip Code: 28339

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 27.00

**Transaction ID : 65c9ae79-7d02-4a3a-8**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 85.00

**Transaction ID : 6c2a08ce-1014-4264-8**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 112.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378274

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 11.10

**Transaction ID : a94ceb94-c81c-4332-8**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Steven Jean

Mailing Address 2012 Harrison Ave

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 80.00

**Transaction ID : 04b3ced8-2bc2-40bb-b**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 91.10

(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378275

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Jean

Mailing Address 2012 Harrison Ave

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 16.50

**Transaction ID : 2b887d9b-baf2-4ddf-9**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 15.00

**Transaction ID : a4007f64-4918-41bd-b**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 31.50

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378276

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 0.60

**Transaction ID : ff511901-80a2-40fe-b**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 45.00

**Transaction ID : d012e51f-5074-41f5-b**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 45.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378277

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 9.00

**Transaction ID : d15a4394-80ca-4a3f-9**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Antoinette Franklin

Mailing Address 8822 Apple St

City: New Orleans State: LA Zip Code: 70188

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 45.00

**Transaction ID : 55c01cc5-b3a5-4d6a-a**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 54.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Alex Peyton

Mailing Address 859 Hicks Rd

City: Washington State: LA Zip Code: 70589

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 100.00

**Transaction ID : a00666be-28a9-4a0e-9**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mr. Alex Peyton

Mailing Address 859 Hicks Rd

City: Washington State: LA Zip Code: 70589

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 45.00

**Transaction ID : b2a8f24c-1983-412d-a**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 145.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378279

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francesca Blom

Mailing Address 101 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 80.00

**Transaction ID : 4b1c1594-1ea3-46a5-a**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 45.00

**Transaction ID : 10c370cd-18e3-481d-a**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 125.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378280

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 31.50

**Transaction ID : d214ef9e-cc78-4672-9**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City: Raleigh State: NC Zip Code: 27610

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 20.00

**Transaction ID : 9f6723b3-903f-4c79-8**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 51.50

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378281

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City Raleigh | State NC | Zip Code 27610

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
7.80

**Transaction ID : cfc0526a-fd58-405c-b**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carey T Henderson

Mailing Address 1025 Inverness Rd

City Suthern Pines | State NC | Zip Code 28387

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
110.00

**Transaction ID : d02dc9b4-fb30-4c2f-b**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 117.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378282

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carey T Henderson

Mailing Address 1025 Inverness Rd

City: Suthern Pines State: NC Zip Code: 28387

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 23.70

**Transaction ID : 7b575e4b-4b56-45ef-8**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tymber D Crawley

Mailing Address 6 Sherwood Dr

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 50.00

**Transaction ID : 3133312c-b242-4761-b**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 73.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tymber D Crawley

Mailing Address 6 Sherwood Dr

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 6.60

**Transaction ID : 0f96d0a6-1f3a-42a9-a**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Aaron L Griffin

Mailing Address 4830 Westin Park Drive

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 50.00

**Transaction ID : 7484e2df-b478-4b49-a**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 56.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Aaron L Griffin

Mailing Address 4830 Westin Park Drive

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 6.60

**Transaction ID : 61083706-a154-4011-8**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lesley Lennox

Mailing Address 2305 Cleary Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 12.50

**Transaction ID : 164320db-d289-4431-b**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 19.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378285

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lesley Lennox

Mailing Address 2305 Cleary Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 4.80

**Transaction ID : 408b7618-fd9e-4626-8**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City: Shelby State: NC Zip Code: 28152

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 60.00

**Transaction ID : 8378b225-9dcf-40a7-b**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 64.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City Shelby | State NC | Zip Code 28152

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
24.00

**Transaction ID : 08b5f9ad-5a4f-41be-8**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport | State LA | Zip Code 71104

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
50.00

**Transaction ID : ea12ee40-0fe4-4625-9**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 74.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378287

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
11.10

**Transaction ID : 3f31355e-9b03-4f52-9**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
80.00

**Transaction ID : 52dd6858-3acf-4393-b**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 91.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport | State LA | Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
17.40

**Transaction ID : 7dd5af5f-e776-4cf3-a**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City Ville Platte | State LA | Zip Code 70586

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
60.00

**Transaction ID : 2c1767e0-d30d-477f-a**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 77.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on MM / DD / YYYY

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 33.60

**Transaction ID : 374d8c69-ee34-4e4f-8**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Stephanie L Heun

Mailing Address 8026 S Wilwood Dr Apt 101

City: Oak Creek State: WI Zip Code: 53154

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 30.00

**Transaction ID : 5dc2d275-4d02-44d9-9**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 63.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378290

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City: Sterling State: VA Zip Code: 20165

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 50.00

**Transaction ID : d39dfde0-f847-4b55-9**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 80.00

**Transaction ID : d232bbc1-c755-4e6f-b**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 130.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378291

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 10.80

**Transaction ID : 419d244e-2707-46be-a**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 80.00

**Transaction ID : ce08b8b0-65b6-4ce5-9**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 90.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378292

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 13.50

**Transaction ID : 03bc709f-4cb2-41b1-b**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mark McNair

Mailing Address 11 Cooper Lane

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 2.15

**Transaction ID : 52e4fc4c-9e09-4fd8-b**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 15.65

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378293

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mark McNair

Mailing Address 11 Cooper Lane

City Conway | State AR | Zip Code 72034

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
6.27

**Transaction ID : 89800817-79b3-480d-a**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
20.00

**Transaction ID : 71d71a0d-fb62-4f68-8**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 26.27

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378294

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on MM / DD / YYYY

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 13.77

Transaction ID : 0af9d75a-774a-42b7-9

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 110.00

Transaction ID : 53361102-d4fc-424a-b

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 123.77

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378295

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 19.20

**Transaction ID : 03fa59e4-642b-4341-a**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 115.00

**Transaction ID : 76198055-dea1-41ba-a**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 134.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378296

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 20.70

**Transaction ID : c5e848f1-38fc-4603-b**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 102.50

**Transaction ID : 5a351092-e0e7-403e-8**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 123.20

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378297

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
17.10

**Transaction ID : 0471a996-e97b-40d6-b**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City Little Rock State AR Zip Code 72205

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
25.00

**Transaction ID : d102055b-8ad8-47c9-9**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 42.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378298

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 14.10

**Transaction ID : cc99bdfc-e334-4131-b**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 60.00

**Transaction ID : ea1cc356-055c-49fd-9**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 74.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378299

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 33.00

**Transaction ID : 0ea30aae-6b08-4521-8**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City: Kenner State: LA Zip Code: 70065

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 25.00

**Transaction ID : 36790c63-ec76-4521-a**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 58.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City: Kenner State: LA Zip Code: 70065

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 8.01

**Transaction ID : e41f4371-b209-4362-8**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 70.00

**Transaction ID : 09e92d01-16a5-45d0-8**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 78.01

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378301

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 9.00

**Transaction ID : cdba94c0-07e1-4453-b**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 80.00

**Transaction ID : e15972e0-0f21-409f-a**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 26.70

**Transaction ID : b8fe5bd2-4536-4ba5-8**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Najib Mahmud

Mailing Address 3432 Riverrock Ct

City: Baton Rouge State: LA Zip Code: 70820

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 50.00

**Transaction ID : e0d06b1e-adc9-4197-9**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 76.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378303

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Najib Mahmud

Mailing Address 3432 Riverrock Ct

City: Baton Rouge State: LA Zip Code: 70820

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 4.80

**Transaction ID : 8f5517bd-c804-4b03-8**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 80.00

**Transaction ID : a9294278-cd3a-497c-9**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 84.80

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378304

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
26.40

**Transaction ID : ee6b63fb-04b9-4b9c-9**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Beverly Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
80.00

**Transaction ID : fae0edcb-7312-4499-9**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 106.40

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378305

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amelia Brackett

Mailing Address 804 Roundabout Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
60.00

**Transaction ID : aec6bc2b-ef49-44c2-a**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Amelia Brackett

Mailing Address 804 Roundabout Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
29.19

**Transaction ID : 1e07a12f-eab3-4179-a**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.19

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
45.00

**Transaction ID : fae27e03-99af-42e0-8**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
0.90

**Transaction ID : 9daed0e2-f25c-4d17-b**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 45.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378307

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Billy Martin

Mailing Address 250 JS Brewton rd

City: goldonna State: LA Zip Code: 71031

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 50.00

**Transaction ID : 159611a1-0211-4575-a**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Billy Martin

Mailing Address 250 JS Brewton rd

City: goldonna State: LA Zip Code: 71031

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 4.80

**Transaction ID : 0fd8c0da-d311-4b9d-a**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 54.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378308

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shantal C Culbreath

Mailing Address 4691 Hercules Lane

City Woodbridge State VA Zip Code 22193

Purpose of Expenditure Salary

Category/Type 001

Date of Public Distribution/Dissemination 08 / 18 / 2014

Amount 80.00

**Transaction ID : 3daa8ab1-4304-471c-a**

Date of Disbursement or Obligation 08 / 18 / 2014

Name of Federal Candidate Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City Winchester State VA Zip Code 22602

Purpose of Expenditure Salary

Category/Type 001

Date of Public Distribution/Dissemination 08 / 18 / 2014

Amount 60.00

**Transaction ID : b1adb42c-5591-4190-9**

Date of Disbursement or Obligation 08 / 18 / 2014

Name of Federal Candidate Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 140.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378309

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jazmine d Conner

Mailing Address 100 ASBURY CT

City WINCHESTER State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
60.00

**Transaction ID : 7f84b5a1-dc4f-4901-9**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City Winchester State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
60.00

**Transaction ID : 9ad6394a-53cf-4f2f-8**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 120.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378310

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 60.00

**Transaction ID : 0ff86c45-f05d-44ee-9**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rodney D Culbreth

Mailing Address 100 Asbury CT
3200 Dam Neck Rd

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 60.00

**Transaction ID : 304fe405-6fb1-4eef-b**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 120.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378311

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rze Culbreath

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 18 / 2014

Amount: 60.00

**Transaction ID : 247d1ef2-a1cf-43b0-a**

Date of Disbursement or Obligation: 08 / 18 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 30.00

**Transaction ID : 209e4e2c-0309-45ac-9**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 90.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378312

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 7.80

**Transaction ID : bffd756f-1f06-41e6-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 80.00

**Transaction ID : 888a1d17-50e5-4fb8-b**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 87.80

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378313

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 33.09

**Transaction ID : 348901f9-a3d8-4e73-b**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City: Greensboro State: NC Zip Code: 27410

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 45.00

**Transaction ID : 6d9211b2-77ba-490b-9**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 78.09

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378314

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
15.90

**Transaction ID : 32d11e25-2287-4521-b**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City Search State AR Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 16 / 2014

Amount
40.00

**Transaction ID : 99444c1f-8b12-4128-a**

Date of Disbursement or Obligation
08 / 16 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 55.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378315

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City: Search State: AR Zip Code: 72149

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 16 / 2014

Amount: 28.50

**Transaction ID : b8c054c6-4084-4bc7-b**

Date of Disbursement or Obligation: 08 / 16 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mark McNair

Mailing Address 11 Cooper Lane

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 15.00

**Transaction ID : 02592df2-a0af-4686-8**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 43.50

**(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378316

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mark McNair

Mailing Address 11 Cooper Lane

City Conway | State AR | Zip Code 72034

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 15 / 2014

Amount
5.22

**Transaction ID : 6fe6c7b2-b73c-4b99-a**

Date of Disbursement or Obligation
08 / 15 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rys Roman

Mailing Address 3277 E 10th St

City Greenville | State NC | Zip Code 27858

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
40.00

**Transaction ID : 10d18bd9-07cd-4839-b**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 45.22

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378317

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rys Roman

Mailing Address 3277 E 10th St

City Greenville | State NC | Zip Code 27858

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
3.96

**Transaction ID : 5687bdd2-8a8b-4555-a**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE | State LA | Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 14 / 2014

Amount
40.00

**Transaction ID : 8ab6b230-98f8-40f8-a**

Date of Disbursement or Obligation
08 / 14 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 43.96

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378318

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jodi Fountain

Mailing Address 1010 S Dogwood Drive

City: Bogalusa State: LA Zip Code: 70427

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 20.00

**Transaction ID : 22e9c0b4-d473-4917-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jodi Fountain

Mailing Address 1010 S Dogwood Drive

City: Bogalusa State: LA Zip Code: 70427

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 0.60

**Transaction ID : 72a0b16d-25b9-4c0a-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 20.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378319

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 35.00

**Transaction ID : 5b5eb880-d909-4efd-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 9.90

**Transaction ID : d2fd1edd-f9db-4497-b**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 44.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378320

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Elizabeth M Moore

Mailing Address 1223 Silver Sage Dr Apt 303

City: Raleigh State: NC Zip Code: 27606

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 20.00

**Transaction ID : caf4f46d-9d26-46e4-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Elizabeth M Moore

Mailing Address 1223 Silver Sage Dr Apt 303

City: Raleigh State: NC Zip Code: 27606

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 6.48

**Transaction ID : aa382c08-c60d-4f1c-b**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 26.48

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378321

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Dwayne C Smith

Mailing Address 900 Bramblegate Rd

City Hope Mills | State NC | Zip Code 28348

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
20.00

**Transaction ID : fe9f2c5c-420a-4746-b**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Dwayne C Smith

Mailing Address 900 Bramblegate Rd

City Hope Mills | State NC | Zip Code 28348

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
4.50

**Transaction ID : d7a7d52e-3fd6-4d1f-a**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 24.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378322

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
55.00

**Transaction ID : 947508d2-fcfa-45e6-b**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
34.50

**Transaction ID : 0518855e-8675-4505-b**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378323

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 60.00

**Transaction ID : 18cad190-4e80-43b7-b**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 8.34

**Transaction ID : 71f5011d-e166-4e15-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 68.34

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378324

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City Search | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
35.00

**Transaction ID : b6bf5a33-4f21-46a1-9**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City Search | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
10.20

**Transaction ID : 1b487190-31f6-4d23-b**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 45.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378325

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Miller

Date of Public Distribution/Dissemination
08 / 19 / 2014

Mailing Address 718 Azalea Dr.
Unit 453

Amount
40.00

City Hampstead | State NC | Zip Code 28443

**Transaction ID : 766c07c9-fb88-4450-b**

Purpose of Expenditure
Salary

Category/Type 001

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lisa Miller

Date of Public Distribution/Dissemination
08 / 19 / 2014

Mailing Address 718 Azalea Dr.
Unit 453

Amount
12.09

City Hampstead | State NC | Zip Code 28443

**Transaction ID : 373d9bc0-99b8-4a0a-9**

Purpose of Expenditure
Mileage

Category/Type 002

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 52.09

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378326

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City Shelby | State NC | Zip Code 28152

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
61.00

**Transaction ID : bee9fb85-f4b2-49f2-a**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City Shelby | State NC | Zip Code 28152

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
24.00

**Transaction ID : c3845402-46ce-4c0b-8**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 85.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378327

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 10.00

**Transaction ID : b390f8cd-b5d9-4603-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 9.60

**Transaction ID : d97dc4f4-9dd5-4a12-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 19.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Antoinette Franklin

Mailing Address 8822 Apple St

City: New Orleans State: LA Zip Code: 70188

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 45.00

**Transaction ID : 634c4999-d4f4-437e-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 80.00

**Transaction ID : 0c5fb69f-8cc3-4dd8-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 125.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378329

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 13.50

**Transaction ID : 735880bd-c6bc-49e1-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carey T Henderson

Mailing Address 1025 Inverness Rd

City: Suthern Pines State: NC Zip Code: 28387

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 40.00

**Transaction ID : 8d2758ce-b506-42bd-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 53.50

**(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378330

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carey T Henderson

Mailing Address 1025 Inverness Rd

City: Suthern Pines State: NC Zip Code: 28387

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 26.10

**Transaction ID : ad0e26df-f9ae-4b12-9**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 10.00

**Transaction ID : 125341fa-cf93-4cff-b**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 36.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378331

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 0.60

**Transaction ID : ecfb6a62-64b0-4349-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eric J Smith

Mailing Address 4967 Dysartville

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 80.00

**Transaction ID : c1992783-55f8-44f9-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 80.60

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378332

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 80.00

**Transaction ID : 16d0e93b-8a85-4b3c-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 7.50

**Transaction ID : 92a0cffd-f6ea-4a99-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 87.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Alex Peyton

Mailing Address 859 Hicks Rd

City: Washington State: LA Zip Code: 70589

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 60.00

**Transaction ID : 78ec47ef-a3e0-4efe-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mr. Alex Peyton

Mailing Address 859 Hicks Rd

City: Washington State: LA Zip Code: 70589

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 40.50

**Transaction ID : d9b5d62f-1f16-4877-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 100.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378334

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mattie Harris

Mailing Address 3654 Tara St

City springdale State AR Zip Code 72762

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
35.00

**Transaction ID : 334dd12a-cb2f-46ec-9**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Mattie Harris

Mailing Address 3654 Tara St

City springdale State AR Zip Code 72762

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
9.60

**Transaction ID : 5869e0f5-74fb-4a28-b**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 44.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378335

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Barbara E Spritz

Mailing Address 3346 Durham St Ext

City: Burlington State: NC Zip Code: 27217

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 50.00

**Transaction ID : c6b50e60-d228-462e-b**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Barbara E Spritz

Mailing Address 3346 Durham St Ext

City: Burlington State: NC Zip Code: 27217

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 3.30

**Transaction ID : 616d4aa9-875f-4dc2-b**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 53.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378336

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City: Spindale State: NC Zip Code: 28160

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 95.00

**Transaction ID : 7041e7c9-4f06-4b07-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City: Spindale State: NC Zip Code: 28160

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 26.97

**Transaction ID : d519a157-d2b7-4413-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 121.97

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378337

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Jean

Mailing Address 2012 Harrison Ave

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 100.00

**Transaction ID : 58150e5f-c431-4571-b**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Steven Jean

Mailing Address 2012 Harrison Ave

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 15.60

**Transaction ID : 312caece-9ee8-44de-b**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 115.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378338

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 50.00

**Transaction ID : b2d1d3b7-159f-41d5-9**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 20.40

**Transaction ID : beae453d-aad8-4980-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 70.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378339

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 50.00

**Transaction ID : ca743ceb-a7f2-4dfe-9**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 20.40

**Transaction ID : f6f640c4-616b-4cc4-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 70.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378340

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Dylan Simon

Mailing Address 111 Millrock Drive

City Lafayette | State LA | Zip Code 70508

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
39.00

**Transaction ID : 316f8dbb-2a36-467a-b**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Dylan Simon

Mailing Address 111 Millrock Drive

City Lafayette | State LA | Zip Code 70508

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
19.56

**Transaction ID : d4573bd9-9e97-4a31-b**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 58.56

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378341

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
20.00

**Transaction ID : d2c4d5a3-a8b0-4ab5-9**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
11.10

**Transaction ID : 83c9c755-eab3-4601-b**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 31.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378342

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
20.00

**Transaction ID : fd09ebd1-59cf-4ebe-8**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
12.90

**Transaction ID : 7908092d-eb3f-491e-8**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 32.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378343

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Theresa A Touchet

Mailing Address 102 French Street #3

City: New Orleans State: LA Zip Code: 70124

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 10.00

**Transaction ID : e1602508-5b95-4705-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Theresa A Touchet

Mailing Address 102 French Street #3

City: New Orleans State: LA Zip Code: 70124

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 0.30

**Transaction ID : df34ed60-347d-4ce1-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 10.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378344

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Barbara A Williams

Mailing Address
3002 Darden Rd
Apt A

City: Greensboro
State: NC
Zip Code: 27407

Purpose of Expenditure
Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 100.00

**Transaction ID : 06f876b2-a5be-433d-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nathan Smith

Mailing Address
1247 W Mt Comfort Rd

City: Fayatteville
State: AR
Zip Code: 72703

Purpose of Expenditure
Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 27.50

**Transaction ID : 6d7888cb-a2ba-4f1b-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 127.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378345

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nathan Smith

Mailing Address 1247 W Mt Comfort Rd

City: Fayatteville State: AR Zip Code: 72703

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 9.84

**Transaction ID : f089eaeb-60fc-4b85-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Xavier Miller

Mailing Address 407 randall Dr

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 50.00

**Transaction ID : 154a0479-e1f9-4b79-b**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 59.84

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eric Wilson

Mailing Address 907 Randall Drive

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 50.00

**Transaction ID : 655b7297-781d-43c1-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eric Wilson

Mailing Address 907 Randall Drive

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 13.95

**Transaction ID : 47729226-2d2b-4827-b**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 63.95

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378347

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 80.00

**Transaction ID : 52db9d9e-5a7f-4ce2-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 28.74

**Transaction ID : bbf26ecd-d2ad-481d-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 108.74

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378348

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Peggy A Sides

Mailing Address 2183 Spokane Rd

City: Fayetteville State: NC Zip Code: 28304

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 40.00

**Transaction ID : e01f3d85-e3e2-44ba-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Peggy A Sides

Mailing Address 2183 Spokane Rd

City: Fayetteville State: NC Zip Code: 28304

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 10.50

**Transaction ID : 7fc06bb2-0f7a-4646-9**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 50.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378349

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City: Sterling State: VA Zip Code: 20165

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 30.00

**Transaction ID : daf0f5ba-51cb-41eb-9**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City: Sterling State: VA Zip Code: 20165

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 30.00

**Transaction ID : 1ed19a44-7770-4a24-9**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 60.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378350

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brittany Jones

Mailing Address 338 Wayne Drive

City Shreveport | State LA | Zip Code 71105

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
12.50

**Transaction ID : ea49e223-70d1-4f15-8**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Stephanie L Heun

Mailing Address 8026 S Wilwood Dr Apt 101

City Oak Creek | State WI | Zip Code 53154

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
40.00

**Transaction ID : c049ccd1-3f36-45d1-b**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 52.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378351

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Roger McKinney

Mailing Address 308 West Main Street

City: Pilot Mountian State: NC Zip Code: 27041

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 52.50

**Transaction ID : fd4ed4f5-e107-4f68-b**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mr. Roger McKinney

Mailing Address 308 West Main Street

City: Pilot Mountian State: NC Zip Code: 27041

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 12.84

**Transaction ID : 7e7d798d-b46e-48fe-9**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 65.34

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378352

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Glenda McKinney

Mailing Address 308 West Main Street

City: Plot Mountain State: NC Zip Code: 27041

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 52.50

**Transaction ID : 2041c554-2adc-42b7-b**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City: Newport State: NC Zip Code: 28570

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 33.00

**Transaction ID : a357e01a-62c4-4b69-b**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 85.50

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378353

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City: Newport State: NC Zip Code: 28570

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 10.35

**Transaction ID : 2e7e8f6b-4112-4616-b**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 87.50

**Transaction ID : a5c20c91-f7a1-4437-9**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 97.85

(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378354

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 20.40

**Transaction ID : 228313a6-818a-4e03-9**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 85.00

**Transaction ID : 53f2fe4c-cf60-4028-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 105.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378355

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point | State: NC | Zip Code: 27260

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 20.10

**Transaction ID : d6339566-c604-45ab-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francesca Blom

Mailing Address 101 Asbury Ct

City: Winchester | State: VA | Zip Code: 22602

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 80.00

**Transaction ID : 53b325ff-fdf4-40f4-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 100.10

(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378356

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
70.00

**Transaction ID : 9880a74e-b75b-415f-b**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
21.60

**Transaction ID : c72b65b8-1af7-4eaa-8**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 91.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 70.00

**Transaction ID : 6655f393-05c1-4f8e-9**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 7.20

**Transaction ID : d05938fe-5a2b-4986-b**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 77.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378358

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 30.00

**Transaction ID : 5b3b4d11-515d-44fb-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 9.30

**Transaction ID : 4bc775ea-dc97-4828-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 39.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City: Kenner State: LA Zip Code: 70065

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 30.00

**Transaction ID : 8963bb1f-596b-4568-9**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City: Kenner State: LA Zip Code: 70065

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 8.19

**Transaction ID : 92c98863-dd5e-4b03-9**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 38.19

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378360

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 10.00

**Transaction ID : 38a6c471-87ad-418e-9**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 5.70

**Transaction ID : 28f4932f-a381-42fc-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 15.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378361

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
100.00

**Transaction ID : 5bb5b31d-22d3-48d1-9**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
25.50

**Transaction ID : 83a8aeac-c9bb-4042-8**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 125.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378362

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 35.00

**Transaction ID : be1d0d7a-23c7-484f-b**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 4.83

**Transaction ID : 0505a45b-af91-41d4-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 39.83

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378363

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shelbi L Randall

Mailing Address 202 East Park Ave Apt 40

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
42.50

**Transaction ID : db419858-a62b-4549-a**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Shelbi L Randall

Mailing Address 202 East Park Ave Apt 40

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
14.88

**Transaction ID : 708ea211-b1e1-430d-8**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 57.38

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378364

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lesley Lennox

Mailing Address 2305 Cleary Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 20.00

**Transaction ID : 3c523e98-888b-4802-b**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lesley Lennox

Mailing Address 2305 Cleary Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 5.70

**Transaction ID : 1febe4c5-fddb-49d1-9**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 25.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378365

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Billy Martin

Mailing Address 250 JS Brewton rd

City goldonna | State LA | Zip Code 71031

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
60.00

**Transaction ID : 28f97ada-1df7-48ec-b**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Billy Martin

Mailing Address 250 JS Brewton rd

City goldonna | State LA | Zip Code 71031

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
5.40

**Transaction ID : fc1fd8e7-6862-4128-8**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 65.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378366

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danelle M Hallenbeck

Mailing Address 2103 Millcroft Rd

City: Pleasant Garden State: NC Zip Code: 27313

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 65.00

**Transaction ID : f9518e15-227d-41d4-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Danelle M Hallenbeck

Mailing Address 2103 Millcroft Rd

City: Pleasant Garden State: NC Zip Code: 27313

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 46.20

**Transaction ID : 9cb9d0f1-75db-41bd-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 111.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378367

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Marysol Netro

Mailing Address 312 S Gunter St

City: Siloam Springs State: AR Zip Code: 72761

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 70.00

**Transaction ID : b0bbeba5-4289-4c58-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Marysol Netro

Mailing Address 312 S Gunter St

City: Siloam Springs State: AR Zip Code: 72761

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 6.00

**Transaction ID : 13a5141e-8a4b-435e-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 76.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378368

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 60.00

**Transaction ID : 6ef2c89f-e893-4993-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 32.10

**Transaction ID : a85bc03e-0241-4a64-b**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 92.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378369

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 30.00

**Transaction ID : 74acc23a-11b4-413d-9**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 30.00

**Transaction ID : db9e2c81-1bb1-4599-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 60.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378370

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney D Culbreth

Mailing Address
100 Asbury CT
3200 Dam Neck Rd

City: Winchester
State: VA
Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 30.00

**Transaction ID : 4e3e24ce-26f1-4b65-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rze Culbreath

Mailing Address
100 Asbury Ct

City: Winchester
State: VA
Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 30.00

**Transaction ID : ee5e5ef6-fa26-4c3e-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 60.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378371

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jazmine d Conner

Mailing Address 100 ASBURY CT

City: WINCHESTER State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 20.00

**Transaction ID : 0ea028de-d15c-48f0-b**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 20.00

**Transaction ID : 566b58a5-f515-4c71-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 40.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Elizabeth DeMaine

Mailing Address 75 Stephenson Ln

City Sheridan | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
50.00

**Transaction ID : 05b83b17-cdc3-4431-8**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Elizabeth DeMaine

Mailing Address 75 Stephenson Ln

City Sheridan | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
34.20

**Transaction ID : 9eb9e4e2-d03d-4e5a-8**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 84.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378373

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
85.00

**Transaction ID : 08ef21e0-486d-4f0b-a**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
33.00

**Transaction ID : 045ed035-23f6-406e-b**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 118.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378374

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Beverly Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
85.00

**Transaction ID : e9b044ae-f00a-4157-b**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City Searcy State AR Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
30.00

**Transaction ID : 0d88f6c6-3e17-4063-9**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 115.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378375

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 12.87

**Transaction ID : c5c61917-8180-4e98-9**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Wayne Burckel

Mailing Address 46 Glenwood Ave

City: Harahan State: LA Zip Code: 70123

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 25.00

**Transaction ID : abed6421-7719-4b8c-8**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 37.87

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378376

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Morgan E Hallenbeck

Mailing Address 3790 Christian Light Rd

City: Fuquay Varina State: NC Zip Code: 27526

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 75.00

**Transaction ID : fcc5cd48-15d4-45cd-b**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Morgan E Hallenbeck

Mailing Address 3790 Christian Light Rd

City: Fuquay Varina State: NC Zip Code: 27526

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 40.80

**Transaction ID : 1ace3d76-dd73-483a-9**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 115.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378377

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 50.00

**Transaction ID : 91dd53ba-5f02-4d93-9**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 04 / 2014

Amount: 24.90

**Transaction ID : 8a4ad242-bfa5-47de-b**

Date of Disbursement or Obligation: 08 / 04 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 74.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378378

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 70.00

**Transaction ID : 201acbcb-9fb4-48cb-b**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 27.00

**Transaction ID : ece54de8-a8da-4567-9**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 97.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378379

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City Mt. Airy State NC Zip Code 27030

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
80.00

**Transaction ID : edf404b6-8fda-4ea4-8**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City Mt. Airy State NC Zip Code 27030

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 19 / 2014

Amount
28.74

**Transaction ID : 7863ab6e-231e-45d8-a**

Date of Disbursement or Obligation
08 / 19 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 108.74

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378380

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mary Johnson

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 50.00

**Transaction ID : 876186fa-36c4-4115-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Casey Stockton

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 50.00

**Transaction ID : a7406ee2-a4dc-4f39-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 100.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378381

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Casey Stockton

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 17.10

**Transaction ID : 25d19fc8-30fb-4d50-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Morgan E Hallenbeck

Mailing Address 3790 Christian Light Rd

City: Fuquay Varina State: NC Zip Code: 27526

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 20.00

**Transaction ID : ea30e98f-9c83-4f90-a**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 37.10

**(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378382

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Morgan E Hallenbeck

Mailing Address 3790 Christian Light Rd

City: Fuquay Varina State: NC Zip Code: 27526

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 14.10

**Transaction ID : 42b9332c-594a-45a6-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Dwayne C Smith

Mailing Address 900 Bramblegate Rd

City: Hope Mills State: NC Zip Code: 28348

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 20.00

**Transaction ID : 7f205de5-fef4-491d-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 34.10

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378383

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Dwayne C Smith

Mailing Address 900 Bramblegate Rd

City Hope Mills | State NC | Zip Code 28348

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
5.70

**Transaction ID : 5b72e295-f09a-4765-8**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City Charlotte | State NC | Zip Code 23215

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
35.00

**Transaction ID : 6ea96722-9e26-4636-a**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 40.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378384

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 10.80

**Transaction ID : 5b90ecd7-22bf-460c-a**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Allie Butler

Mailing Address 1676 Shady Creek Rd

City: Ayden State: NC Zip Code: 28513

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 52.50

**Transaction ID : c68b76b9-2382-4374-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 63.30

(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378385

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Allie Butler

Mailing Address 1676 Shady Creek Rd

City: Ayden State: NC Zip Code: 28513

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 33.78

**Transaction ID : fe2178ff-d613-45ac-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 50.00

**Transaction ID : a90f6f8a-ae67-4242-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 83.78

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 16.80

**Transaction ID : fd290439-50f1-47fc-b**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Barbara A Williams

Mailing Address 3002 Darden Rd
Apt A

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 50.00

**Transaction ID : f3fafd5b-2e2a-4d03-b**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 66.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378387

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Chinchar

Mailing Address 2730 Dave Ward Dr

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 50.00

**Transaction ID : 117160ae-674d-4146-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Chinchar

Mailing Address 2730 Dave Ward Dr

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 5.40

**Transaction ID : 1dbb6480-fdb5-42b8-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 55.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378388

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Caleb Craig

Mailing Address 1410 Bushville drive

City Lenoir | State NC | Zip Code 28645

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
100.00

**Transaction ID : b88dcf8f-ea6a-47bd-a**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Caleb Craig

Mailing Address 1410 Bushville drive

City Lenoir | State NC | Zip Code 28645

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
23.10

**Transaction ID : 9e73b767-b39f-4d17-a**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 123.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378389

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City Search | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
35.00

**Transaction ID : 75c86566-c28d-4021-9**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City Search | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
6.90

**Transaction ID : 727141da-900d-417e-a**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 41.90

**(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.

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951378390

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shantal C Culbreath

Mailing Address 4691 Hercules Lane

City Woodbridge State VA Zip Code 22193

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
80.00

**Transaction ID : ef4ec68e-6b96-4a66-9**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City Metaire State LA Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
25.00

**Transaction ID : 91ca0ed0-4335-46d7-a**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 105.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378391

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 1.20

**Transaction ID : 96b457e5-c474-4540-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Linda J Fueling

Mailing Address 6424 Purple Martin Ct

City: Wilmington State: NC Zip Code: 28411

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 60.00

**Transaction ID : 3296313f-d9be-4774-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 61.20

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378392

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Linda J Fueling

Mailing Address 6424 Purple Martin Ct

City: Wilmington State: NC Zip Code: 28411

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 17.73

**Transaction ID : f1f1ae6a-30ea-4aad-a**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Peggy A Sides

Mailing Address 2183 Spokane Rd

City: Fayetteville State: NC Zip Code: 28304

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 80.00

**Transaction ID : c74437de-36ef-4290-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 97.73

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378393

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Peggy A Sides

Mailing Address 2183 Spokane Rd

City: Fayetteville State: NC Zip Code: 28304

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 7.50

**Transaction ID : 0aa59e2c-dd3b-4614-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francesca Blom

Mailing Address 101 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 80.00

**Transaction ID : 53b3def8-6843-4d8e-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 87.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378394

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Alex Peyton

Mailing Address 859 Hicks Rd

City: Washington State: LA Zip Code: 70589

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 100.00

**Transaction ID : 04f35617-da04-45bf-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Mr. Alex Peyton

Mailing Address 859 Hicks Rd

City: Washington State: LA Zip Code: 70589

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 37.50

**Transaction ID : 49a7db7d-92e0-4554-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 137.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378395

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 80.00

**Transaction ID : b26ea846-f30c-4e2e-a**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 9.00

**Transaction ID : 53a228a5-e61f-4c8d-b**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378396

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eric J Smith

Mailing Address 4967 Dysartville

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 80.00

**Transaction ID : 7887de1a-a84e-4af0-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 50.00

**Transaction ID : e8de061b-aa3d-494e-b**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 130.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378397

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 22.80

**Transaction ID : 1fc651fb-19da-4ed4-b**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 50.00

**Transaction ID : 830a8aca-c856-46d0-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 72.80

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378398

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 21.90

**Transaction ID : 5021abdb-33af-4594-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eric Wilson

Mailing Address 907 Randall Drive

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 25.00

**Transaction ID : 065524f5-8f53-49eb-b**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 46.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378399

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eric Wilson

Mailing Address 907 Randall Drive

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 3.75

**Transaction ID : 840f008b-699b-4bcc-a**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Peter Sahuc

Mailing Address 107 Phillip Ave

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 40.00

**Transaction ID : e4632ce5-b7a5-4a70-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 43.75

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378400

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Peter Sahuc

Mailing Address 107 Phillip Ave

City Lafayette | State LA | Zip Code 70503

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
4.71

**Transaction ID : b4cf3c7c-03c1-4d26-b**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Steven Jean

Mailing Address 2012 Harrison Ave

City Winston Salem | State NC | Zip Code 27105

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
80.00

**Transaction ID : 8fc39a18-e4e3-4ffd-a**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 84.71

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378401

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Jean

Mailing Address 2012 Harrison Ave

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 15.00

**Transaction ID : 43e07f87-f143-473e-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Stephanie L Heun

Mailing Address 8026 S Wilwood Dr Apt 101

City: Oak Creek State: WI Zip Code: 53154

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 30.00

**Transaction ID : da8ac29c-2c06-4382-b**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 45.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378402

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Courtney Goldstein

Mailing Address 1809 N Woodlawn

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 35.00

**Transaction ID : c0bccf44-38ce-447a-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Courtney Goldstein

Mailing Address 1809 N Woodlawn

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 6.00

**Transaction ID : e32db722-ec5c-4401-a**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 41.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951378403

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brenda L Dawson

Mailing Address 6021 General Samuel Rd

City: Jacksonville State: AR Zip Code: 72076

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 17.00

**Transaction ID : 38e880b5-5227-4271-a**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brenda L Dawson

Mailing Address 6021 General Samuel Rd

City: Jacksonville State: AR Zip Code: 72076

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 3.60

**Transaction ID : 267fc9b6-823c-4a9a-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 20.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378404

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Adam Rock

Mailing Address 307 Farris Rd Apt 1

City Conway | State AR | Zip Code 72034

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
45.00

**Transaction ID : 782de992-c40d-43fb-a**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Adam Rock

Mailing Address 307 Farris Rd Apt 1

City Conway | State AR | Zip Code 72034

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
4.50

**Transaction ID : 5c3f19ae-9d02-4fac-a**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 49.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378405

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Linda J Fueling

Mailing Address 6424 Purple Martin Ct

City: Wilmington State: NC Zip Code: 28411

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 10.00

**Transaction ID : fdd01e95-aba7-425b-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Linda J Fueling

Mailing Address 6424 Purple Martin Ct

City: Wilmington State: NC Zip Code: 28411

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 8.10

**Transaction ID : 6563eb02-a238-4ef0-b**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 18.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378406

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 40.00

**Transaction ID : 700d26af-0c07-433d-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 24.00

**Transaction ID : f8c45ca2-33f1-4535-a**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 64.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378407

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 65.00

**Transaction ID : 312e014e-b5c9-487c-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 38.10

**Transaction ID : f419d5da-c5c7-422f-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 103.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378408

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City: Sterling State: VA Zip Code: 20165

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 20.00

**Transaction ID : bf620668-7115-4f50-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 70.00

**Transaction ID : 521dec78-e9de-4d64-b**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 90.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378409

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 70.00

**Transaction ID : 784b7d64-707a-4c20-a**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rodney D Culbreth

Mailing Address 100 Asbury CT
3200 Dam Neck Rd

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 70.00

**Transaction ID : 8eef1977-91fb-4b2f-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 140.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378410

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Aaron L Griffin

Mailing Address 4830 Westin Park Drive

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 35.00

**Transaction ID : bad2f8cb-2b47-40a3-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Aaron L Griffin

Mailing Address 4830 Westin Park Drive

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 5.40

**Transaction ID : 5467cf4e-c30c-451c-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 40.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378411

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City Eden | State NC | Zip Code 27288

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
100.00

**Transaction ID : c85e3bd7-503f-4a6a-b**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City Eden | State NC | Zip Code 27288

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
7.20

**Transaction ID : 542c9413-8cf6-4bdc-b**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 107.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378412

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rze Culbreath

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 65.00

**Transaction ID : ba6a3ac6-9ef8-4b30-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 70.00

**Transaction ID : dcec54e8-160a-419d-a**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 135.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378413

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tymber D Crawley

Mailing Address 6 Sherwood Dr

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 35.00

**Transaction ID : 4d03eaec-0685-4c18-a**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tymber D Crawley

Mailing Address 6 Sherwood Dr

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 5.40

**Transaction ID : a13b4b21-c7ad-457b-a**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 40.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378414

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
20.00

**Transaction ID : 8c3551ce-ea60-4e5a-b**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
10.50

**Transaction ID : 52d34080-eac0-42b5-b**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 30.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378415

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
30.00

**Transaction ID : 10d21d7c-8652-49f0-9**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
11.10

**Transaction ID : 18469887-d546-4bad-b**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 41.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 30.00

**Transaction ID : 5bce2873-6d3b-4c93-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 8.40

**Transaction ID : b6410a71-0716-4f22-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 38.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378417

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Tatro

Mailing Address 1208 Braeburn Rd

City: Charlotte State: NC Zip Code: 28211

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 50.00

**Transaction ID : c39baf2b-bf03-4478-b**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James Tatro

Mailing Address 1208 Braeburn Rd

City: Charlotte State: NC Zip Code: 28211

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 3.60

**Transaction ID : 6dbd1e2f-e586-4ee1-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 53.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378418

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jenna M Ledford

Mailing Address 2279 Gouges Creek Rd

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 80.00

**Transaction ID : 9c772b18-dff3-4dc2-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jenna M Ledford

Mailing Address 2279 Gouges Creek Rd

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 22.92

**Transaction ID : 60714071-93a2-4275-b**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 102.92

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378419

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 50.00

**Transaction ID : 0b205dd6-6cc8-4ed5-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 6.60

**Transaction ID : 732f8e44-6545-411a-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 56.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378420

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 80.00

**Transaction ID : 73e64092-4559-4962-b**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 9.30

**Transaction ID : 4f2aba69-080d-45a2-a**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378421

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 80.00

**Transaction ID : 6fda400d-1747-4b95-b**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 12.00

**Transaction ID : 42c90daa-523f-48cf-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 92.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378422

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
35.00

**Transaction ID : 57aa930f-8fca-4149-b**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
17.10

**Transaction ID : a8188998-b674-41f2-9**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 52.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378423

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Vonniqua Jackson

Mailing Address
111 Westchester Blvd
Apt D4

City: Slidell State: LA Zip Code: 70458

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 43.00

**Transaction ID : d5945dd3-40d5-4825-b**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lourdes Lopez

Mailing Address
2936 Brushwood Ave

City: Springdale State: AR Zip Code: 72764

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 30.00

**Transaction ID : 551b6770-9b71-4092-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 73.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378424

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lourdes Lopez

Mailing Address 2936 Brushwood Ave

City Springdale | State AR | Zip Code 72764

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
9.00

**Transaction ID : c1a3ae1e-894f-4225-9**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Shelbi L Randall

Mailing Address 202 East Park Ave Apt 40

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
45.00

**Transaction ID : 9b02f58c-1d05-41bd-a**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 54.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378425

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shelbi L Randall

Mailing Address 202 East Park Ave Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 23.76

**Transaction ID : 5c208c56-3409-4735-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Meagan M Cates

Mailing Address 1425 Arden Lane

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 20.00

**Transaction ID : 44a4fd8f-114c-41e3-b**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 43.76

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378426

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Meagan M Cates

Mailing Address 1425 Arden Lane

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 0.90

**Transaction ID : b207a2dd-e167-4192-a**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 40.00

**Transaction ID : 1e011130-b75b-41b9-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 40.90

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378427

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte | State: LA | Zip Code: 70586

Purpose of Expenditure: Mileage | Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 31.20

**Transaction ID : 7061f304-e14c-414f-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mr. Roger McKinney

Mailing Address 308 West Main Street

City: Pilot Mountian | State: NC | Zip Code: 27041

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 112.50

**Transaction ID : 0a7b8d05-e745-4126-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 143.70

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378428

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Roger McKinney

Mailing Address 308 West Main Street

City: Pilot Mountian | State: NC | Zip Code: 27041

Purpose of Expenditure: Mileage | Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 29.16

**Transaction ID : dff8405b-d72e-46de-b**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette | State: LA | Zip Code: 70503

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 30.00

**Transaction ID : e4d452a0-f8f2-4c85-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 59.16

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378429

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 3.00

**Transaction ID : 87e7e0f7-a168-45dd-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Glenda McKinney

Mailing Address 308 West Main Street

City: Plot Mountain State: NC Zip Code: 27041

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 112.50

**Transaction ID : 6e9ebfef-0c71-4b54-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 115.50

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378430

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Marysol Netro

Mailing Address 312 S Gunter St

City: Siloam Springs State: AR Zip Code: 72761

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 70.00

**Transaction ID : acbb2064-b2a6-443d-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Marysol Netro

Mailing Address 312 S Gunter St

City: Siloam Springs State: AR Zip Code: 72761

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 10.50

**Transaction ID : b97758b5-b98d-49ff-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 80.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378431

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 80.00

**Transaction ID : 8970b0df-551f-4bbf-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 23.40

**Transaction ID : a14ac737-0680-4e25-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 103.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378432

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 80.00

**Transaction ID : d63499ea-c944-430c-b**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 24.30

**Transaction ID : f54dc8ef-a43c-4b73-a**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 104.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378433

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
80.00

**Transaction ID : 796f822c-e9ef-412d-a**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
23.10

**Transaction ID : 58dbc1e0-bc48-4f71-9**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 103.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378434

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 90.00

**Transaction ID : 97d38432-5012-4b06-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 29.79

**Transaction ID : b3e0d8c5-2e36-4384-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 119.79

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
70.00

**Transaction ID : e5c3b571-d761-4d56-a**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
1.50

**Transaction ID : 3dd095c0-c6d2-4d7e-a**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 71.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378436

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 25.00

**Transaction ID : e9d2dfaa-a0b6-4235-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 14.40

**Transaction ID : e702dddc-adf6-45dc-b**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 39.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378437

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Emily Butler

Mailing Address 1676 Shady Creek Rd

City: Ayden State: NC Zip Code: 28513

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 51.70

**Transaction ID : 59d622a3-43f5-4561-a**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 70.00

**Transaction ID : c427f947-b4d4-4c67-b**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 121.70

(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378438

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 13.50

**Transaction ID : fcc5eabf-6a9b-49e3-a**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Elizabeth DeMaine

Mailing Address 75 Stephenson Ln

City: Sheridan State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 40.00

**Transaction ID : a3e2deae-947a-48bd-a**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 53.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Elizabeth DeMaine

Mailing Address 75 Stephenson Ln

City: Sheridan State: AR Zip Code: 72143

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 36.60

**Transaction ID : 6b11e668-04d9-460a-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 50.00

**Transaction ID : 64a44900-e3dc-4429-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 86.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378440

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
24.30

**Transaction ID : 2f1f3e37-27f5-430d-9**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shanon Snyder

Mailing Address 2701 Winifred

City Metairie State LA Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 20 / 2014

Amount
20.00

**Transaction ID : 83321056-df69-45e7-a**

Date of Disbursement or Obligation
08 / 20 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 44.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378441

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shanon Snyder

Mailing Address 2701 Winifred

City: Metairie State: LA Zip Code: 70003

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 3.00

**Transaction ID : d9faae92-5206-4d42-b**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Amelia Brackett

Mailing Address 804 Roundabout Circle

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 30.00

**Transaction ID : 9fbef96c-0204-4011-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 33.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378442

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amelia Brackett

Mailing Address 804 Roundabout Circle

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 30.60

**Transaction ID : 94c551e9-c030-4cbe-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Laura U Logie

Mailing Address 2565 Shire Circle

City: Harrisonburg State: VA Zip Code: 22801

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 20.00

**Transaction ID : 816e001f-58c1-4a58-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 50.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378443

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eric Wilson

Mailing Address 907 Randall Drive

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 25.00

**Transaction ID : 7ea550e5-4091-41be-8**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eric Wilson

Mailing Address 907 Randall Drive

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 3.75

**Transaction ID : 687b6607-b3b0-4381-a**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 28.75

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378444

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Allie Butler

Mailing Address 1676 Shady Creek Rd

City: Ayden State: NC Zip Code: 28513

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 35.00

**Transaction ID : ed2fb4d8-2623-414b-8**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 40.00

**Transaction ID : 58b70acf-4baf-4740-a**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 75.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378445

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 6.24

**Transaction ID : c47f2771-5083-47ab-9**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City: Newport State: NC Zip Code: 28570

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 20.00

**Transaction ID : 3079cc0d-ce10-41a0-9**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 26.24

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378446

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City: Newport State: NC Zip Code: 28570

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 7.80

**Transaction ID : 9d28c09e-a532-4898-a**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 50.00

**Transaction ID : 371757a2-4f92-45b6-9**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 57.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378447

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock | State: AR | Zip Code: 72116

Purpose of Expenditure: Mileage | Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 6.72

**Transaction ID : a78f291a-c6ab-47c7-a**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton | State: NC | Zip Code: 28655

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 80.00

**Transaction ID : a8e9885b-df30-447c-8**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 86.72

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378448

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City Morganton State NC Zip Code 28655

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
9.00

**Transaction ID : 6d6efcfb-efbc-4713-b**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eric J Smith

Mailing Address 4967 Dysartville

City Morganton State NC Zip Code 28655

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
80.00

**Transaction ID : e24f9fc6-9cc1-4468-8**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 89.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378449

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Chinchar

Mailing Address 2730 Dave Ward Dr

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 45.00

**Transaction ID : 858f1483-4955-42d1-8**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Chinchar

Mailing Address 2730 Dave Ward Dr

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 4.50

**Transaction ID : 80cb7d35-18b5-4b88-a**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 49.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378450

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Miller

Mailing Address 718 Azalea Dr.
Unit 453

City: Hampstead State: NC Zip Code: 28443

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 50.00

**Transaction ID : 8bd0b0e9-342e-4aea-9**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lisa Miller

Mailing Address 718 Azalea Dr.
Unit 453

City: Hampstead State: NC Zip Code: 28443

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 13.59

**Transaction ID : be42f9a7-c88c-412d-a**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 63.59

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378451

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 30.00

**Transaction ID : 21d59e0b-80d8-410b-9**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 11.10

**Transaction ID : 62f474ea-6c63-46d5-8**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 41.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378452

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Casey Stockton

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 40.00

**Transaction ID : 4b299135-7b48-47e0-8**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Casey Stockton

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 14.10

**Transaction ID : b1fcbfd2-d71f-4a9d-9**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 54.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378453

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mary Johnson

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 40.00

**Transaction ID : a8ad12a2-2dee-4a81-8**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Peter Sahuc

Mailing Address 107 Phillip Ave

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 30.00

**Transaction ID : 5d713011-c711-45c9-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 70.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378454

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Peter Sahuc

Mailing Address 107 Phillip Ave

City Lafayette State LA Zip Code 70503

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
3.93

**Transaction ID : 84ff5812-99d1-4b9f-b**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shantal C Culbreath

Mailing Address 4691 Hercules Lane

City Woodbridge State VA Zip Code 22193

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
80.00

**Transaction ID : 2c9cc265-7e5e-43a0-a**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 83.93

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378455

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City Spindale | State NC | Zip Code 28160

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
82.50

**Transaction ID : 29a88317-d53b-4782-8**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City Spindale | State NC | Zip Code 28160

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
23.25

**Transaction ID : 3f7b8154-bdb9-4313-9**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 105.75

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378456

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shantal C Culbreath

Mailing Address 4691 Hercules Lane

City Woodbridge State VA Zip Code 22193

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
80.00

**Transaction ID : 9303e765-0f27-4b17-8**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lourdes Lopez

Mailing Address 2936 Brushwood Ave

City Springdale State AR Zip Code 72764

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
30.00

**Transaction ID : e6bcb6c3-8966-4421-9**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 110.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lourdes Lopez

Mailing Address 2936 Brushwood Ave

City: Springdale State: AR Zip Code: 72764

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 9.00

**Transaction ID : 7c98f202-f78f-4d49-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jenna M Ledford

Mailing Address 2279 Gouges Creek Rd

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 55.00

**Transaction ID : dd179efd-0a28-4a14-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 64.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378458

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jenna M Ledford

Mailing Address 2279 Gouges Creek Rd

City: Spruce Pine | State: NC | Zip Code: 28777

Purpose of Expenditure: Mileage | Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 20.64

**Transaction ID : 1731be84-f9d6-4f6d-9**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jodi Fountain

Mailing Address 1010 S Dogwood Drive

City: Bogalusa | State: LA | Zip Code: 70427

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 10.00

**Transaction ID : d557b129-0afb-4e18-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 30.64

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378459

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City Shelby State NC Zip Code 28152

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
60.00

**Transaction ID : 3eb9a95e-45e9-4fa0-b**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City Shelby State NC Zip Code 28152

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
33.00

**Transaction ID : ecb43be8-7e64-4f7d-b**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 93.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378460

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Linda J Fueling

Mailing Address 6424 Purple Martin Ct

City: Wilmington State: NC Zip Code: 28411

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 55.00

**Transaction ID : f1ffe755-567e-4fa3-9**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Linda J Fueling

Mailing Address 6424 Purple Martin Ct

City: Wilmington State: NC Zip Code: 28411

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 15.63

**Transaction ID : 949b8c55-0999-4b7b-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 70.63

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378461

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 80.00

**Transaction ID : 090de6b8-d7af-4276-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 13.20

**Transaction ID : 4faa8047-b598-4658-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 93.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378462

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Antoinette Franklin

Mailing Address 8822 Apple St

City: New Orleans State: LA Zip Code: 70188

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 40.00

**Transaction ID : 850aec93-c982-41c3-9**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jessica Habakjian

Mailing Address 4193 W. Lang St

City: Farmville State: NC Zip Code: 27828

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 60.00

**Transaction ID : 2239f24e-c0a6-43d1-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 100.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378463

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jessica Habakjian

Mailing Address 4193 W. Lang St

City: Farmville State: NC Zip Code: 27828

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 9.60

**Transaction ID : 46714a20-4501-44b0-9**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 60.00

**Transaction ID : 652f49be-d809-4588-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 69.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378464

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 39.30

**Transaction ID : e6e5d127-839a-4596-a**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Sue G Walker

Mailing Address 3 Girard

City: Fort Smith State: AR Zip Code: 72901

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 30.00

**Transaction ID : 538b152a-ba2e-4383-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 69.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378465

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Sue G Walker

Mailing Address 3 Girard

City: Fort Smith State: AR Zip Code: 72901

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 7.80

**Transaction ID : 4ede99eb-2c13-4482-9**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Evelyn Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 20.00

**Transaction ID : 718e1ab0-ff91-41c3-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 27.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378466

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Evelyn Lesaicherre

Mailing Address 629 Radiance Ave

City Metairie | State LA | Zip Code 70001

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
3.00

**Transaction ID : 42c04a67-413f-4643-8**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
32.50

**Transaction ID : a8ae75f8-8fde-4fd9-8**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 35.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

---

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 24.18

**Transaction ID : bdf5ac96-b8b5-4e93-8**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

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Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City: Shreveport State: LA Zip Code: 71104

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 70.00

**Transaction ID : 60ce058f-8aa9-4aff-9**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

---

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 94.18

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378468

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
16.80

**Transaction ID : 559f31f3-a5f2-4f05-8**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Barbara A Williams

Mailing Address 3002 Darden Rd
Apt A

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
80.00

**Transaction ID : 1a7de52f-9e35-4bdd-9**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 96.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378469

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
80.00

**Transaction ID : fcf40361-c841-41f1-8**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
19.50

**Transaction ID : 914e6065-7658-4326-b**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 99.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378470

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 70.00

**Transaction ID : 1a7787b9-bdaf-44f2-a**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 33.60

**Transaction ID : 5e7615f8-322c-484e-a**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 103.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378471

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 70.00

**Transaction ID : 43804e31-2f74-4b81-a**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 33.60

**Transaction ID : 20787a23-470c-4e4a-9**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 103.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378472

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 100.00

**Transaction ID : addb8712-63a0-492a-9**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 6.30

**Transaction ID : aee943e8-4316-4648-8**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 106.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378473

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Logan B Piper

Mailing Address 3205 Pebble Beach Rd

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 13.00

**Transaction ID : e7b2718d-093f-4a7a-a**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Logan B Piper

Mailing Address 3205 Pebble Beach Rd

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 0.69

**Transaction ID : 7a967ff0-2987-4432-9**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 13.69

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378474

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
80.00

**Transaction ID : 996a1713-405d-4cde-8**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
27.00

**Transaction ID : 7ed5f921-af0d-46b8-8**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 107.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378475

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 85.00

**Transaction ID : 0dbe0d60-6f69-4f23-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 26.25

**Transaction ID : 0e11a5d2-b9e4-4f67-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 111.25

**(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.

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951378476

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Peggy A Sides

Mailing Address 2183 Spokane Rd

City: Fayetteville State: NC Zip Code: 28304

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 80.00

**Transaction ID : dabf17e8-8410-4f7d-a**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Peggy A Sides

Mailing Address 2183 Spokane Rd

City: Fayetteville State: NC Zip Code: 28304

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 9.00

**Transaction ID : a941a81a-cc0c-46f6-a**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Emily Butler

Mailing Address 1676 Shady Creek Rd

City: Ayden State: NC Zip Code: 28513

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 33.30

**Transaction ID : 94370a68-1d44-444b-a**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Emily Butler

Mailing Address 1676 Shady Creek Rd

City: Ayden State: NC Zip Code: 28513

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 24.60

**Transaction ID : 7fb490b8-b0fa-4bb1-9**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 57.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378478

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Laura U Logie

Mailing Address 2565 Shire Circle

City Harrisonburg State VA Zip Code 22801

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
40.00

**Transaction ID : b2626525-c0dd-4735-a**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Francesca Blom

Mailing Address 101 Asbury Ct

City Winchester State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
80.00

**Transaction ID : b8b05ecb-13ba-4fa8-9**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 120.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378479

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
65.00

**Transaction ID : 3d2391f2-1d88-46a8-9**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City Sterling State VA Zip Code 20165

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
20.00

**Transaction ID : 6672d62f-cffa-4c07-b**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 85.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378480

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City: Kenner State: LA Zip Code: 70065

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 70.00

**Transaction ID : 8591a36d-13ac-4269-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City: Kenner State: LA Zip Code: 70065

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 10.08

**Transaction ID : 091a141d-5275-4f68-a**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 80.08

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378481

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 50.00

**Transaction ID : 5a0c1fa6-434e-40d2-8**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 16.80

**Transaction ID : a2edaf9c-b30c-4562-8**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 66.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378482

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carmen Maddrey

Mailing Address 2043 Nottingham Ln

City: Burlington State: NC Zip Code: 27215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 50.00

**Transaction ID : 58ce23cb-4cd0-4e12-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carmen Maddrey

Mailing Address 2043 Nottingham Ln

City: Burlington State: NC Zip Code: 27215

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 7.80

**Transaction ID : 32d7bd69-00c7-4c81-a**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 57.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378483

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Marysol Netro

Mailing Address 312 S Gunter St

City: Siloam Springs State: AR Zip Code: 72761

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 40.00

**Transaction ID : d3d1f01a-3c68-4a1d-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Marysol Netro

Mailing Address 312 S Gunter St

City: Siloam Springs State: AR Zip Code: 72761

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 3.60

**Transaction ID : 2237907e-6964-4341-8**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 43.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378484

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Vonniqua Jackson

Mailing Address
111 Westchester Blvd
Apt D4

City: Slidell
State: LA
Zip Code: 70458

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 43.00

**Transaction ID : d2020b6e-6fae-4b49-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address
220 Doucet Rd

City: Lafayette
State: LA
Zip Code: 70503

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 30.00

**Transaction ID : 9920bfce-3dab-45a7-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 73.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378485

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City Lafayette | State LA | Zip Code 70503

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
1.92

**Transaction ID : 48d930a4-04bd-4410-a**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Shelbi L Randall

Mailing Address 202 East Park Ave Apt 40

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
50.00

**Transaction ID : fb8eafe0-fe56-4e85-b**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 51.92

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shelbi L Randall

Mailing Address 202 East Park Ave Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 36.60

**Transaction ID : d47aa86d-0942-43e7-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kaleigh J Wagner

Mailing Address 18065 Wayne Rd

City: Odessa State: FL Zip Code: 33556

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 60.00

**Transaction ID : 42a878af-8195-48af-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 96.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378487

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Randy M Gold

Mailing Address 1436 Haigs Creek Dr

City: Elgin State: SC Zip Code: 29045

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 60.00

**Transaction ID : 25f3011a-6c7b-4cd1-8**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Randy M Gold

Mailing Address 1436 Haigs Creek Dr

City: Elgin State: SC Zip Code: 29045

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 33.00

**Transaction ID : 4ff8d594-ab76-465f-8**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 93.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378488

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Roger McKinney

Date of Public Distribution/Dissemination
08 / 21 / 2014

Mailing Address 308 West Main Street

Amount
63.30

City: Pilot Mountian State: NC Zip Code: 27041

**Transaction ID : 7e80a7a7-03ba-45f4-a**

Date of Disbursement or Obligation
08 / 21 / 2014

Purpose of Expenditure
Salary

Category/Type 001

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Mr. Roger McKinney

Date of Public Distribution/Dissemination
08 / 21 / 2014

Mailing Address 308 West Main Street

Amount
17.67

City: Pilot Mountian State: NC Zip Code: 27041

**Transaction ID : 31bbd3ed-b1fe-47f3-9**

Date of Disbursement or Obligation
08 / 21 / 2014

Purpose of Expenditure
Mileage

Category/Type 002

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 80.97

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378489

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Glenda McKinney

Mailing Address 308 West Main Street

City: Plot Mountain | State: NC | Zip Code: 27041

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 63.30

**Transaction ID : 9bc8654d-5fb2-410d-8**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City: Winchester | State: VA | Zip Code: 22602

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 70.00

**Transaction ID : fb7415ba-8c35-43be-8**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 133.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378490

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jazmine d Conner

Mailing Address 100 ASBURY CT

City WINCHESTER State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
60.00

**Transaction ID : cdd22da2-98d2-4884-b**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City Winchester State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
70.00

**Transaction ID : 6c68ef14-88c2-4fdb-a**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 130.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378491

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 80.00

**Transaction ID : 79ac3d5e-4acf-49ee-a**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rodney D Culbreth

Mailing Address 100 Asbury CT
3200 Dam Neck Rd

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 80.00

**Transaction ID : dde29354-31b8-471d-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 160.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378492

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rze Culbreath

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 80.00

**Transaction ID : 91c7d8d8-13dd-4895-9**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carol L Walters

Mailing Address 1900 Glen West Way

City: Fort Smith State: AR Zip Code: 72916

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 40.00

**Transaction ID : 9c56a16a-3318-4b42-8**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 120.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378493

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carol L Walters

Mailing Address 1900 Glen West Way

City: Fort Smith State: AR Zip Code: 72916

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 6.30

**Transaction ID : b18802b2-411f-4c0f-a**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 85.00

**Transaction ID : 931d10eb-57eb-4349-a**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 91.30

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378494

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
39.60

**Transaction ID : 9d8ad534-7f6f-4f82-a**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Beverly Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
85.00

**Transaction ID : fb836243-d312-4978-a**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 124.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378495

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City Raleigh State NC Zip Code 27604

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
20.00

**Transaction ID : 03076cc3-e0bf-4037-b**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City Raleigh State NC Zip Code 27604

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
5.70

**Transaction ID : 4aeb6880-7214-46bb-9**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 25.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378496

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Jean

Mailing Address 2012 Harrison Ave

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 100.00

**Transaction ID : a056382f-20a7-45ac-9**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Steven Jean

Mailing Address 2012 Harrison Ave

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 15.00

**Transaction ID : 1650dab7-fa72-4d3b-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 115.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378497

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Xavier Miller

Mailing Address 407 randall Dr

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
50.00

**Transaction ID : 0af3ffff-7cef-42f1-b**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Xavier Miller

Mailing Address 407 randall Dr

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
19.50

**Transaction ID : 28c02ed9-d68c-4bef-a**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 69.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378498

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Taylor N Randall

Mailing Address
2002 E Park Ave
Apt 40

City: Searcy
State: AR
Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 50.00

**Transaction ID : cce1ec72-17a1-43d7-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Theresa A Touchet

Mailing Address
102 French Street #3

City: New Orleans
State: LA
Zip Code: 70124

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 4.00

**Transaction ID : 507b9ea0-11ad-4323-9**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 54.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378499

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Theresa A Touchet

Mailing Address 102 French Street #3

City: New Orleans State: LA Zip Code: 70124

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 0.30

**Transaction ID : 5f097166-480c-441b-8**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 35.00

**Transaction ID : cc6f8c2e-cbdd-42dd-8**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 35.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 6.60

**Transaction ID : 130286e9-c46f-4ae4-a**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 57.50

**Transaction ID : 20ab2aaf-1af9-41e4-9**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 64.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378501

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 23.40

**Transaction ID : e55715f5-8b10-40b0-9**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James Tatro

Mailing Address 1208 Braeburn Rd

City: Charlotte State: NC Zip Code: 28211

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 70.00

**Transaction ID : e1fd7019-233f-4daf-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 93.40

(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378502

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Tatro

Mailing Address 1208 Braeburn Rd

City: Charlotte State: NC Zip Code: 28211

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 3.30

**Transaction ID : 693a00d1-a0a7-4e08-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 50.00

**Transaction ID : fea1b52e-9f75-494a-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 53.30

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378503

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point | State: NC | Zip Code: 27260

Purpose of Expenditure: Mileage | Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 21.30

**Transaction ID : 8e540ca3-3fd4-49fa-8**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City: Greensboro | State: NC | Zip Code: 27407

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 80.00

**Transaction ID : 21d3739c-5125-4d63-b**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 101.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378504

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
23.70

**Transaction ID : 9e4fb4dd-d551-410e-9**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City New Orleans State LA Zip Code 70131

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 21 / 2014

Amount
50.00

**Transaction ID : 8e34c955-30c7-4fa4-8**

Date of Disbursement or Obligation
08 / 21 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 73.70

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378505

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 80.00

**Transaction ID : 71aa1543-fdc9-4671-9**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 12.00

**Transaction ID : d4591656-d97d-453d-a**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 92.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378506

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 30.00

**Transaction ID : 46d54a02-b321-4674-9**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 25.80

**Transaction ID : e7539661-be06-4368-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 55.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378507

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 90.00

**Transaction ID : 065b3592-8586-4199-8**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 20 / 2014

Amount: 29.79

**Transaction ID : 790783aa-3d2c-4224-b**

Date of Disbursement or Obligation: 08 / 20 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 119.79

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378508

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joneisha Stewart

Mailing Address 2329 Runnymede Dr

City: Marrero State: LA Zip Code: 70072

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 80.00

**Transaction ID : 8c361017-2d5e-4f10-a**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shantal C Culbreath

Mailing Address 4691 Hercules Lane

City: Woodbridge State: VA Zip Code: 22193

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 20.00

**Transaction ID : a5874f70-b737-4ae0-b**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 100.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378509

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Sue G Walker

Mailing Address 3 Girard

City: Fort Smith State: AR Zip Code: 72901

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 45.00

**Transaction ID : 101663f3-eb51-410e-9**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Sue G Walker

Mailing Address 3 Girard

City: Fort Smith State: AR Zip Code: 72901

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 10.20

**Transaction ID : 19c571b8-4b9b-42d3-9**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 55.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378510

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Kindstedt

Mailing Address 5510 Dogwood Dr

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 25.00

**Transaction ID : 62981567-0c3b-4440-b**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James Kindstedt

Mailing Address 5510 Dogwood Dr

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 19.20

**Transaction ID : 721c2abc-0c17-496b-9**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 44.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378511

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joanna Kindstedt

Mailing Address 2134 Tobaccoville Rd

City: Rural Hall State: NC Zip Code: 27045

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 25.00

**Transaction ID : 01c12ed7-9ab2-4d2c-9**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Erika Burfield

Mailing Address 2939 Country Club Drive

City: Hampstead State: NC Zip Code: 28443

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 45.00

**Transaction ID : 33552eac-7576-47e9-9**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 70.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378512

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Erika Burfield

Mailing Address 2939 Country Club Drive

City Hampstead | State NC | Zip Code 28443

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
12.30

**Transaction ID : 31da5770-ccf3-4be7-a**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City New Bern | State NC | Zip Code 28560

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
37.50

**Transaction ID : 463c01bf-e7b2-46f4-b**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 49.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378513

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 5.34

**Transaction ID : c7506463-f1c1-4d70-9**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 20.00

**Transaction ID : 259d1101-94bf-4317-a**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 25.34

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378514

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 5.40

**Transaction ID : 3e28736d-9ae0-48bd-a**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Antoinette Franklin

Mailing Address 8822 Apple St

City: New Orleans State: LA Zip Code: 70188

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 40.00

**Transaction ID : b73c13be-5175-48f4-b**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 45.40

**(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378515

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 80.00

**Transaction ID : 84cba995-52bf-4a7b-8**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 13.50

**Transaction ID : 31bb4076-08a6-4d00-b**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 93.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 80.00

**Transaction ID : b9bde387-09fc-4f35-9**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 13.50

**Transaction ID : 66908441-b3d0-4082-9**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 93.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378517

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City Spindale | State NC | Zip Code 28160

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
62.50

**Transaction ID : 9c11b230-a79a-4ba5-b**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City Spindale | State NC | Zip Code 28160

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
24.45

**Transaction ID : ed8b1099-96a4-4b71-8**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 86.95

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378518

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eric J Smith

Mailing Address 4967 Dysartville

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 80.00

**Transaction ID : 7369b733-7194-4879-8**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 80.00

**Transaction ID : 64bc5bd2-3864-4453-b**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 160.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378519

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on MM / DD / YYYY

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 9.00

**Transaction ID : 41c7a3d4-1695-4464-a**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Elizabeth M Moore

Mailing Address 1223 Silver Sage Dr Apt 303

City: Raleigh State: NC Zip Code: 27606

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 15.00

**Transaction ID : fcd9908c-e099-42d3-8**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 24.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Elizabeth M Moore

Mailing Address 1223 Silver Sage Dr Apt 303

City: Raleigh State: NC Zip Code: 27606

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 4.17

**Transaction ID : 21979687-2499-4c38-9**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Warren Gravois

Mailing Address 16005 7th St

City: Pearlington State: MS Zip Code: 39572

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 30.00

**Transaction ID : 99e9c5d3-3b25-424f-8**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 34.17

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378521

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Warren Gravois

Mailing Address 16005 7th St

City: Pearlington State: MS Zip Code: 39572

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 2.10

**Transaction ID : 6afb376e-141a-4b3b-b**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Laura U Logie

Mailing Address 2565 Shire Circle

City: Harrisonburg State: VA Zip Code: 22801

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 20.00

**Transaction ID : 1cb385fc-c90e-45e3-a**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 22.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378522

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 20.00

**Transaction ID : 8bc3997e-9af7-4608-b**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 3.93

**Transaction ID : 760d1cda-b2f6-466d-8**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 23.93

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378523

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City Shelby State NC Zip Code 28152

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
64.00

**Transaction ID : ab16e185-9c29-47d1-b**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City Shelby State NC Zip Code 28152

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
24.60

**Transaction ID : 95405dcc-0a52-4231-b**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 88.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378524

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nicole N Ball

Mailing Address 2528 Mill Creek Rd

City: Newport State: NC Zip Code: 28570

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 40.00

**Transaction ID : 8e72c78d-f4c0-4937-a**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nicole N Ball

Mailing Address 2528 Mill Creek Rd

City: Newport State: NC Zip Code: 28570

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 13.50

**Transaction ID : 143d0ae7-eb40-4937-a**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 53.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378525

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City: Wilmington State: NC Zip Code: 28405

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 50.00

**Transaction ID : 287818e1-d0d4-4b9e-8**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City: Wilmington State: NC Zip Code: 28405

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 12.60

**Transaction ID : 2d2e9de3-274e-44b0-8**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 62.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378526

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City: Newport State: NC Zip Code: 28570

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 33.00

**Transaction ID : 67e423b7-9a8b-4cca-9**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City: Newport State: NC Zip Code: 28570

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 17.31

**Transaction ID : 9b339bae-4d19-44a5-9**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 50.31

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378527

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Miller

Mailing Address 718 Azalea Dr.
Unit 453

City: Hampstead State: NC Zip Code: 28443

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 51.50

**Transaction ID : 5025248d-d2ea-4c19-9**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lisa Miller

Mailing Address 718 Azalea Dr.
Unit 453

City: Hampstead State: NC Zip Code: 28443

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 17.37

**Transaction ID : 92bd8e5c-f9f3-4e92-8**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 68.87

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378528

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amanda Boley

Mailing Address Split Oak Drive

City charlotte State NC Zip Code 28227

Purpose of Expenditure Salary

Category/Type 001

Date of Public Distribution/Dissemination 08 / 22 / 2014

Amount 60.00

**Transaction ID : 20339eb2-b388-400b-8**

Date of Disbursement or Obligation 08 / 22 / 2014

Name of Federal Candidate Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Amanda Boley

Mailing Address Split Oak Drive

City charlotte State NC Zip Code 28227

Purpose of Expenditure Mileage

Category/Type 002

Date of Public Distribution/Dissemination 08 / 22 / 2014

Amount 25.68

**Transaction ID : 4c5bb6c0-98bd-4792-9**

Date of Disbursement or Obligation 08 / 22 / 2014

Name of Federal Candidate Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 85.68

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378529

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francesca Blom

Mailing Address 101 Asbury Ct

City Winchester | State VA | Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
80.00

**Transaction ID : d5d954dd-4dc9-4317-8**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jacob S Mann

Mailing Address 3875 Old Stage Rd S

City Erwin | State NC | Zip Code 28339

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
20.00

**Transaction ID : 117ac07f-0100-48e4-b**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 100.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378530

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jacob S Mann

Mailing Address 3875 Old Stage Rd S

City: Erwin State: NC Zip Code: 28339

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 33.00

**Transaction ID : 1246ac5d-ad56-4d14-9**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lourdes Lopez

Mailing Address 2936 Brushwood Ave

City: Springdale State: AR Zip Code: 72764

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 30.00

**Transaction ID : bee88db3-5d49-4a28-b**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 63.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378531

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lourdes Lopez

Mailing Address 2936 Brushwood Ave

City Springdale | State AR | Zip Code 72764

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
13.50

**Transaction ID : 694ee719-7dcd-4365-8**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City Ville Platte | State LA | Zip Code 70586

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
55.00

**Transaction ID : 53b7b1c3-7445-48a4-9**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 68.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378532

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 38.40

**Transaction ID : c8961615-bbec-4f89-b**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Stephanie L Heun

Mailing Address 8026 S Wilwood Dr Apt 101

City: Oak Creek State: WI Zip Code: 53154

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 50.00

**Transaction ID : ec76c90f-4b18-4a70-a**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 88.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378533

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
60.00

**Transaction ID : 17fa4b1b-85a3-442f-b**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
12.00

**Transaction ID : b245e241-3cad-4d71-b**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 72.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378534

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
80.00

**Transaction ID : 5ddbba6c-95d2-427c-b**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
18.00

**Transaction ID : 20bd80d1-e49f-41c3-b**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 98.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378535

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Claire A Smith

Mailing Address 6610 Walcott Rd

City: Paragoud State: AR Zip Code: 72450

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 40.00

**Transaction ID : 8ef81fad-4c0f-4366-b**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Barbara A Williams

Mailing Address 3002 Darden Rd
Apt A

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 100.00

**Transaction ID : 86e0d3fe-5a78-49f9-8**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 140.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378536

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Peggy A Sides

Mailing Address 2183 Spokane Rd

City: Fayetteville State: NC Zip Code: 28304

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 40.00

**Transaction ID : c167b995-2443-4e13-8**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Peggy A Sides

Mailing Address 2183 Spokane Rd

City: Fayetteville State: NC Zip Code: 28304

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 40.00

**Transaction ID : 7ef09b15-7ac6-406e-a**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 80.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378537

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Linda J Fueling

Mailing Address 6424 Purple Martin Ct

City: Wilmington State: NC Zip Code: 28411

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 54.00

**Transaction ID : 0fa83a6f-bc1d-4c6f-b**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Linda J Fueling

Mailing Address 6424 Purple Martin Ct

City: Wilmington State: NC Zip Code: 28411

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 16.32

**Transaction ID : 4d76cca6-cf93-4631-9**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 70.32

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378538

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Thomas Dias

Mailing Address 110 Maryella Dr

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
50.00

**Transaction ID : 0ceca6f7-bd3d-4129-a**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Thomas Dias

Mailing Address 110 Maryella Dr

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
28.20

**Transaction ID : 34bbfd20-b9e5-451d-9**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 78.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378539

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City Search | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
40.00

**Transaction ID : 9623318c-0cee-4292-a**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City Search | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
18.90

**Transaction ID : 672683b2-422e-4d67-9**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 58.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378540

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James W Blevins

Date of Public Distribution/Dissemination
08 / 22 / 2014

Mailing Address
108 East Clinton St
PO Box 410

Amount
27.50

City: Salemburg State: NC Zip Code: 28385

**Transaction ID : 1514607f-9e79-4c45-8**

Purpose of Expenditure
Salary

Category/Type 001

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
James W Blevins

Date of Public Distribution/Dissemination
08 / 22 / 2014

Mailing Address
108 East Clinton St
PO Box 410

Amount
7.38

City: Salemburg State: NC Zip Code: 28385

**Transaction ID : 738c23d1-c60f-48a5-9**

Purpose of Expenditure
Mileage

Category/Type 002

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 34.88

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378541

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 70.00

**Transaction ID : 03fe59df-660f-489f-8**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 19.50

**Transaction ID : 13fb1fe2-22b9-4514-a**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378542

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Evelyn Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 45.00

**Transaction ID : b5620ee4-147f-4f23-9**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Evelyn Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 3.60

**Transaction ID : b732495a-ebef-4f61-8**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 48.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378543

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brenda L Dawson

Mailing Address 6021 General Samuel Rd

City: Jacksonville State: AR Zip Code: 72076

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 17.00

**Transaction ID : 5e07260d-1f19-4c29-9**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brenda L Dawson

Mailing Address 6021 General Samuel Rd

City: Jacksonville State: AR Zip Code: 72076

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 4.80

**Transaction ID : dfad46af-98cb-423e-8**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 21.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378544

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full): Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼ C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee: Marysol Netro
Mailing Address: 312 S Gunter St
City: Siloam Springs State: AR Zip Code: 72761
Purpose of Expenditure: Salary
Category/Type: 001
Date of Public Distribution/Dissemination: 08 / 22 / 2014
Amount: 70.00
Transaction ID : 34ed9c5a-6077-40cc-b
Date of Disbursement or Obligation: 08 / 22 / 2014
Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose
Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR
Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62
Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee: Marysol Netro
Mailing Address: 312 S Gunter St
City: Siloam Springs State: AR Zip Code: 72761
Purpose of Expenditure: Mileage
Category/Type: 002
Date of Public Distribution/Dissemination: 08 / 22 / 2014
Amount: 9.90
Transaction ID : a3f1b2a3-45c7-49c5-a
Date of Disbursement or Obligation: 08 / 22 / 2014
Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose
Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR
Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62
Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 79.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378545

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
100.00

**Transaction ID : b3151f77-5b96-469e-a**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
27.60

**Transaction ID : 8b736862-d5a4-4110-a**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 127.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378546

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
70.00

**Transaction ID : 78a72723-a1ea-40b5-a**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
36.00

**Transaction ID : 43a51b99-1663-4d50-b**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 106.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378547

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City Raleigh | State NC | Zip Code 27604

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
40.00

**Transaction ID : ea623e8b-4c70-487b-8**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City Raleigh | State NC | Zip Code 27604

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
9.30

**Transaction ID : 201b0a5f-dc54-4ebf-a**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 49.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378548

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Beverly Williams

Mailing Address 3007 Darden Rd

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 70.00

**Transaction ID : bda3c272-6729-49ec-a**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 25.00

**Transaction ID : d06dd836-81df-4e68-8**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 95.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 3.69

**Transaction ID : 10ed984f-f388-438d-b**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 70.00

**Transaction ID : 418fbb1b-7e0b-4144-9**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 73.69

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378550

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jazmine d Conner

Mailing Address 100 ASBURY CT

City: WINCHESTER State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 70.00

**Transaction ID : 91a42385-3d26-4961-b**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 70.00

**Transaction ID : 4431e8c0-a698-4f1f-a**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 140.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378551

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 20.00

**Transaction ID : ddba2745-799b-41f8-b**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 13.50

**Transaction ID : adafd97d-ed4f-4cb0-a**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 33.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378552

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City Winchester State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
80.00

**Transaction ID : 828becaf-a86e-4a70-9**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Rodney D Culbreth

Mailing Address 100 Asbury CT
3200 Dam Neck Rd

City Winchester State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
80.00

**Transaction ID : 8c8d108c-d379-46ab-9**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 160.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378553

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rze Culbreath

Mailing Address 100 Asbury Ct

City Winchester | State VA | Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
80.00

**Transaction ID : b695e0ae-a73f-4f71-b**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Theresa a Youngblood

Mailing Address 102 S Main Street Apt A2

City Berryville | State VA | Zip Code 22611

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
95.00

**Transaction ID : 482e3226-e367-45da-a**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 175.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
67.50

**Transaction ID : d8ff75ac-74da-46a3-9**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
23.40

**Transaction ID : 6ff5b2e1-f685-4249-a**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 90.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378555

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 70.00

**Transaction ID : b1ee66e5-889d-48ca-9**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 10.50

**Transaction ID : f2ff0ab6-aa66-469d-8**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 80.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378556

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 50.00

**Transaction ID : 7f900cdf-797a-437f-b**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 32.40

**Transaction ID : 70753c5d-c2b3-4948-8**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 82.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 70.00

**Transaction ID : f0b9e407-6f2a-43fb-b**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 24.69

**Transaction ID : 07694232-4ca0-4556-8**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 94.69

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378558

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
70.00

**Transaction ID : e7ac2331-9ed2-4728-8**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
2.10

**Transaction ID : fdc4e29d-348d-4e6e-8**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 72.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378559

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full): Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼ C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee: Adam Rock
Mailing Address: 307 Farris Rd Apt 1
City: Conway State: AR Zip Code: 72034
Purpose of Expenditure: Salary
Category/Type: 001
Date of Public Distribution/Dissemination: 08 / 22 / 2014
Amount: 40.00
Transaction ID : cab1ca18-e530-4021-8
Date of Disbursement or Obligation: 08 / 22 / 2014
Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose
Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR
Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62
Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee: Adam Rock
Mailing Address: 307 Farris Rd Apt 1
City: Conway State: AR Zip Code: 72034
Purpose of Expenditure: Mileage
Category/Type: 002
Date of Public Distribution/Dissemination: 08 / 22 / 2014
Amount: 3.60
Transaction ID : 33bdd5e9-2f78-4fcb-b
Date of Disbursement or Obligation: 08 / 22 / 2014
Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose
Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR
Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62
Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 43.60

(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.

*Ms. Emily Buchanan* *[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378560

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 70.00

**Transaction ID : 5c5abb9e-60df-467d-8**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 24.84

**Transaction ID : a01593bf-0385-4833-b**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 94.84

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378561

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Randy M Gold

Mailing Address 1436 Haigs Creek Dr

City: Elgin State: SC Zip Code: 29045

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 60.00

**Transaction ID : 1e4ed261-897a-4c3d-b**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Randy M Gold

Mailing Address 1436 Haigs Creek Dr

City: Elgin State: SC Zip Code: 29045

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 34.62

**Transaction ID : f644c784-f18d-4991-b**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 94.62

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nathan D Wirebaugh

Mailing Address 7320 Red Maple Dr

City Holland State OH Zip Code 43528

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
10.00

**Transaction ID : 53e6bd95-7b4b-4062-a**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kaleigh J Wagner

Mailing Address 18065 Wayne Rd

City Odessa State FL Zip Code 33556

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
60.00

**Transaction ID : 70abb17f-9eb1-4059-a**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 70.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378563

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 50.00

**Transaction ID : bae833d4-69e9-49c4-8**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 6.90

**Transaction ID : 0d3268fb-077d-4d40-b**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 56.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378564

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carol L Walters

Mailing Address 1900 Glen West Way

City: Fort Smith State: AR Zip Code: 72916

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 35.00

**Transaction ID : 1858e0fb-9fc5-41a1-a**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carol L Walters

Mailing Address 1900 Glen West Way

City: Fort Smith State: AR Zip Code: 72916

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 0.60

**Transaction ID : 7b8c24a0-eb92-404b-8**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 35.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378565

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 100.00

**Transaction ID : fa0919ed-7222-4c01-8**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 9.60

**Transaction ID : 4545e467-0622-40d3-a**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 109.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378566

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 60.00

**Transaction ID : 755443b4-bbcc-41c7-8**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 10.80

**Transaction ID : 59272d73-1da3-4343-a**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 70.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378567

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City: Kenner State: LA Zip Code: 70065

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 65.00

**Transaction ID : 7d47a128-7fa3-4d40-9**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Cassidy Quartararo

Mailing Address 632 Cameron Court

City: Kenner State: LA Zip Code: 70065

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 9.87

**Transaction ID : bda19ffc-d2c8-446f-b**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 74.87

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378568

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Wayne Burckel

Mailing Address 46 Glenwood Ave

City Harahan | State LA | Zip Code 70123

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
20.00

**Transaction ID : 673421c8-d40f-4480-8**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City Sterling | State VA | Zip Code 20165

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
20.00

**Transaction ID : 98fcd19a-5415-4bf6-b**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 40.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378569

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brenda L Dawson

Mailing Address 6021 General Samuel Rd

City: Jacksonville State: AR Zip Code: 72076

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 22.00

**Transaction ID : 7d6d57bd-5ae7-4604-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brenda L Dawson

Mailing Address 6021 General Samuel Rd

City: Jacksonville State: AR Zip Code: 72076

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 5.10

**Transaction ID : 00f18347-4389-42fd-a**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 27.10

**(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.

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951378570

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Cari A Stevenson

Mailing Address 12312 Summer Cemetary Rd

City: Cabot State: AR Zip Code: 72023

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 30.00

**Transaction ID : 1cfd538f-e0a0-464d-b**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Cari A Stevenson

Mailing Address 12312 Summer Cemetary Rd

City: Cabot State: AR Zip Code: 72023

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 9.00

**Transaction ID : c97d3625-481d-4aaf-9**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 39.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378571

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 60.00

**Transaction ID : 46cd35ad-45ca-46cd-9**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brenda L McCune

Mailing Address 1254 Fleming St Apt 6

City: Conway State: AR Zip Code: 72032

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 45.00

**Transaction ID : dd2ca308-9e40-4fc6-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 105.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brenda L McCune

Mailing Address 1254 Fleming St Apt 6

City: Conway State: AR Zip Code: 72032

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 2.10

**Transaction ID : 0382c0a6-b303-4cdd-b**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nicole N Ball

Mailing Address 2528 Mill Creek Rd

City: Newport State: NC Zip Code: 28570

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 20.00

**Transaction ID : f53727ed-aba3-482e-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 22.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378573

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nicole N Ball

Mailing Address 2528 Mill Creek Rd

City Newport | State NC | Zip Code 28570

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
12.00

**Transaction ID : 0577c7d7-7525-400b-a**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jacob L Colbert

Mailing Address 49 Sharon Circle

City Greenbrier | State AR | Zip Code 72058

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
15.00

**Transaction ID : c3fe4ca3-5ece-435b-9**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 27.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378574

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jacob L Colbert

Mailing Address 49 Sharon Circle

City Greenbrier State AR Zip Code 72058

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
6.00

**Transaction ID : d04f1eef-1ce5-42ba-a**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Todd Ellis

Mailing Address P.O. Box 712

City Alexander State AR Zip Code 72002

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
55.00

**Transaction ID : 1edcd4e3-8a56-4a60-b**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 61.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378575

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Todd Ellis

Mailing Address P.O. Box 712

City Alexander State AR Zip Code 72002

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
55.00

**Transaction ID : e51cac8f-56c7-4e43-9**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Todd Ellis

Mailing Address P.O. Box 712

City Alexander State AR Zip Code 72002

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
22.50

**Transaction ID : 18725d4c-2103-4754-8**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 77.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378576

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Todd Ellis

Mailing Address P.O. Box 712

City: Alexander State: AR Zip Code: 72002

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 22.50

**Transaction ID : a582d40e-48f5-4858-b**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Warren Gravois

Mailing Address 16005 7th St

City: Pearlington State: MS Zip Code: 39572

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 25.00

**Transaction ID : 39d8a8c8-15c7-4220-b**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 47.50

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378577

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Warren Gravois

Mailing Address 16005 7th St

City: Pearlington State: MS Zip Code: 39572

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 1.50

**Transaction ID : d463447e-92ef-4ca5-9**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rachel Moran

Mailing Address 915 E Market Ave Box 13479

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 45.00

**Transaction ID : a11e79d2-8af0-4971-b**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 46.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378578

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rachel Moran

Mailing Address 915 E Market Ave Box 13479

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 26.64

**Transaction ID : fd2437a2-3f00-4fc8-b**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Elizabeth M Moore

Mailing Address 1223 Silver Sage Dr Apt 303

City: Raleigh State: NC Zip Code: 27606

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 12.50

**Transaction ID : 3a65d851-3f5d-41e9-9**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 39.14

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378579

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Elizabeth M Moore

Mailing Address 1223 Silver Sage Dr Apt 303

City: Raleigh State: NC Zip Code: 27606

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 6.03

**Transaction ID : 0f5ef5b4-c2dd-46ec-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Laura U Logie

Mailing Address 2565 Shire Circle

City: Harrisonburg State: VA Zip Code: 22801

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 20.00

**Transaction ID : d07fa052-4bfa-4f79-a**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 26.03

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378580

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Linda J Fueling

Mailing Address 6424 Purple Martin Ct

City: Wilmington State: NC Zip Code: 28411

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 70.00

**Transaction ID : 13586f4c-3fda-40e1-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Linda J Fueling

Mailing Address 6424 Purple Martin Ct

City: Wilmington State: NC Zip Code: 28411

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 26.01

**Transaction ID : e16151e8-d14d-4b0f-a**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 96.01

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378581

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Morgan E Hallenbeck

Mailing Address 3790 Christian Light Rd

City: Fuquay Varina State: NC Zip Code: 27526

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 30.00

**Transaction ID : 810f9cf9-43dd-4035-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Morgan E Hallenbeck

Mailing Address 3790 Christian Light Rd

City: Fuquay Varina State: NC Zip Code: 27526

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 12.60

**Transaction ID : 987a1489-d420-43cf-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 42.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378582

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Dylan Simon

Mailing Address 111 Millrock Drive

City Lafayette | State LA | Zip Code 70508

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
49.67

**Transaction ID : 6ad3a582-9f61-47dc-8**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Dylan Simon

Mailing Address 111 Millrock Drive

City Lafayette | State LA | Zip Code 70508

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
23.46

**Transaction ID : f8bd6356-dcee-4b1c-a**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 73.13

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378583

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Quinn K Freas

Mailing Address 5445 Landseer Way

City: Cumming State: GA Zip Code: 30040

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 35.00

**Transaction ID : 814a22b2-e406-4679-b**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jessica Habakjian

Mailing Address 4193 W. Lang St

City: Farmville State: NC Zip Code: 27828

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 50.00

**Transaction ID : 840939e8-41d1-448a-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 85.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378584

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jessica Habakjian

Mailing Address 4193 W. Lang St

City: Farmville State: NC Zip Code: 27828

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 6.30

**Transaction ID : 9542c848-3566-4573-9**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 46.00

**Transaction ID : 407ba712-4da2-4c05-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 52.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378585

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 28.86

**Transaction ID : bbe30b5f-1691-4e9c-a**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Adam Rock

Mailing Address 307 Farris Rd Apt 1

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 45.00

**Transaction ID : 387e555b-4123-4590-9**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 73.86

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378586

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Adam Rock

Mailing Address 307 Farris Rd Apt 1

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 13.50

**Transaction ID : 02522952-de70-48c8-b**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Holly M Tippett

Mailing Address 595 Saint Gabrielle Dr

City: Florissant State: MO Zip Code: 63033

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 50.00

**Transaction ID : e55cb58f-bddf-4f69-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 63.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378587

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Holly M Tippett

Mailing Address 595 Saint Gabrielle Dr

City: Florissant State: MO Zip Code: 63033

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 26.64

**Transaction ID : 1f58aa2d-841a-49ab-a**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 40.00

**Transaction ID : f5f9c022-810e-4ed7-a**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 66.64

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378588

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Zachary Vidrine

Mailing Address 202 Rue Des Cajun

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 16.80

**Transaction ID : 06333e13-e3a5-43f5-a**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Elizabeth DeMaine

Mailing Address 75 Stephenson Ln

City: Sheridan State: AR Zip Code: 72143

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 50.00

**Transaction ID : 32b45d52-3345-416a-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 66.80

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378589

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Elizabeth DeMaine

Mailing Address 75 Stephenson Ln

City Sheridan | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
42.60

**Transaction ID : 8109ef02-7522-472d-b**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City Search | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
25.00

**Transaction ID : 9c6e2375-67b2-4997-8**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 67.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378590

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City: Search | State: AR | Zip Code: 72149

Purpose of Expenditure: Mileage | Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 12.90

**Transaction ID : 9de1e7f2-43e1-4b21-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James Kindstedt

Mailing Address 5510 Dogwood Dr

City: Winston Salem | State: NC | Zip Code: 27105

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 35.00

**Transaction ID : dc8409ee-9813-424d-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 47.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378591

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Kindstedt

Mailing Address 5510 Dogwood Dr

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 11.55

**Transaction ID : 4f5f2afd-ea55-440c-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Peter Sahuc

Mailing Address 107 Phillip Ave

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 50.00

**Transaction ID : e2457859-7f2f-43b6-b**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 61.55

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378592

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Peter Sahuc

Mailing Address 107 Phillip Ave

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 4.74

**Transaction ID : 5f9a757a-aebd-416f-a**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joanna Kindstedt

Mailing Address 2134 Tobaccoville Rd

City: Rural Hall State: NC Zip Code: 27045

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 35.00

**Transaction ID : a468d16b-a385-437b-9**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 39.74

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378593

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eric J Smith

Mailing Address 4967 Dysartville

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 80.00

**Transaction ID : 5aaf994b-7ccd-4b95-a**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 80.00

**Transaction ID : 6536c1c2-72b0-4faf-a**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 160.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378594

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 6.00

**Transaction ID : abc0616a-0e56-4f92-b**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lindsey E Helms

Mailing Address 301 N Clinic Apt 3

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 80.00

**Transaction ID : 5fef7a12-6f71-4145-b**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 86.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378595

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shantal C Culbreath

Mailing Address 4691 Hercules Lane

City Woodbridge State VA Zip Code 22193

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
80.00

**Transaction ID : ba9dfed7-2477-42cd-a**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James W Blevins

Mailing Address 108 East Clinton St
PO Box 410

City Salemburg State NC Zip Code 28385

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
35.00

**Transaction ID : b5bddda5-18e5-4c5b-9**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 115.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378596

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James W Blevins

Date of Public Distribution/Dissemination
08 / 23 / 2014

Mailing Address
108 East Clinton St
PO Box 410

Amount
15.84

City: Salemburg State: NC Zip Code: 28385

**Transaction ID : bf971b6b-690b-43df-b**

Purpose of Expenditure
Mileage

Category/Type 002

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Nathan Smith

Date of Public Distribution/Dissemination
08 / 23 / 2014

Mailing Address
1247 W Mt Comfort Rd

Amount
31.67

City: Fayatteville State: AR Zip Code: 72703

**Transaction ID : e295e8ea-dc43-4e2c-9**

Purpose of Expenditure
Salary

Category/Type 001

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 47.51

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378597

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nathan Smith

Mailing Address 1247 W Mt Comfort Rd

City: Fayatteville State: AR Zip Code: 72703

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 8.04

**Transaction ID : 3bb64f9b-1c98-411a-b**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Najib Mahmud

Mailing Address 3432 Riverrock Ct

City: Baton Rouge State: LA Zip Code: 70820

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 60.00

**Transaction ID : bf5d5b34-cab6-4e25-a**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 68.04

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378598

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Najib Mahmud

Mailing Address 3432 Riverrock Ct

City: Baton Rouge State: LA Zip Code: 70820

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 5.70

**Transaction ID : 43faffd5-4a83-4bb4-b**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City: Shreveport State: LA Zip Code: 71119

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 80.00

**Transaction ID : 09c4fbbf-2bfb-41ef-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 85.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378599

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City: Shreveport State: LA Zip Code: 71119

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 27.30

**Transaction ID : efdd4775-2369-4bb2-9**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Matt Curran

Mailing Address 1537 Country Lane

City: Kernersville State: NC Zip Code: 27284

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 35.00

**Transaction ID : a375cf3f-c58c-4cd8-b**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 62.30

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378600

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Matt Curran

Mailing Address 1537 Country Lane

City Kernersville State NC Zip Code 27284

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
11.16

**Transaction ID : a5c0dca1-d968-42ec-8**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
80.00

**Transaction ID : 0aa09082-c666-47f1-a**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 91.16

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378601

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
19.50

**Transaction ID : f7f1146e-657a-4e88-b**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Eric Wilson

Mailing Address 907 Randall Drive

City Searcy State AR Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
40.00

**Transaction ID : da43b7dd-0dcb-4adb-8**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 59.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378602

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eric Wilson

Mailing Address 907 Randall Drive

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
30.90

**Transaction ID : e14f46b5-1e9b-4a16-9**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City Sterling | State VA | Zip Code 20165

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
50.00

**Transaction ID : 9691a7b8-842b-459b-a**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 80.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378603

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Theresa a Youngblood

Mailing Address 102 S Main Street Apt A2

City: Berryville State: VA Zip Code: 22611

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 75.00

**Transaction ID : 55578e9a-334d-4e2b-a**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 80.00

**Transaction ID : c1b2af13-2ce2-48e0-b**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 155.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378604

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 10.80

Transaction ID : e395d455-4933-4a7c-8

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Taylor N Randall

Mailing Address 2002 E Park Ave
Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 105.00

Transaction ID : 8f7f3702-7a72-4b55-a

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 115.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378605

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Taylor N Randall

Mailing Address
2002 E Park Ave
Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 27.51

**Transaction ID : 4b3e62d7-a469-4915-a**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shelbi L Randall

Mailing Address
202 East Park Ave Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 105.00

**Transaction ID : 3f7589cc-1769-4103-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 132.51

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378606

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
80.00

**Transaction ID : df72ff77-1a4c-4ad2-8**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 554635.78

Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
1.80

**Transaction ID : 998905c6-5edc-4ada-a**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 554635.78

Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 81.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte | State: LA | Zip Code: 70586

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 50.00

**Transaction ID : 03d26720-8844-40c4-9**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte | State: LA | Zip Code: 70586

Purpose of Expenditure: Mileage | Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 20.10

**Transaction ID : a698600f-d1c7-4edf-a**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 70.10

**(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.

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951378608

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 30.00

**Transaction ID : e2aef547-ea43-4619-a**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 3.09

**Transaction ID : eb1293d4-64d8-44d7-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 33.09

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378609

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 40.00

**Transaction ID : b6f942e6-80b5-4568-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 18.00

**Transaction ID : 0c3a906b-5ea0-4a52-a**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 58.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378610

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carol L Snow

Mailing Address 6281 Jenkins rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 20.00

**Transaction ID : 627f25a1-cfe0-48ed-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carol L Snow

Mailing Address 6281 Jenkins rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 20.00

**Transaction ID : 5b74314f-8dd2-4d0c-9**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 40.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378611

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carol L Snow

Mailing Address 6281 Jenkins rd

City Morganton State NC Zip Code 28655

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
8.70

**Transaction ID : 31287cb3-9def-4854-b**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Carol L Snow

Mailing Address 6281 Jenkins rd

City Morganton State NC Zip Code 28655

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
8.70

**Transaction ID : 6a44ac6e-35e7-4d1f-9**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 17.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378612

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Claire A Smith

Mailing Address 6610 Walcott Rd

City: Paragoud State: AR Zip Code: 72450

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 25.00

**Transaction ID : d3894651-ca03-44e5-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Claire A Smith

Mailing Address 6610 Walcott Rd

City: Paragoud State: AR Zip Code: 72450

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 12.90

**Transaction ID : e2123145-f2a0-4296-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 37.90

**(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.

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951378613

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Benjamin Hernandez

Mailing Address 915 E Market Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
70.00

**Transaction ID : 2a13adba-769c-4618-b**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Benjamin Hernandez

Mailing Address 915 E Market Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
29.70

**Transaction ID : a1df01e7-ac47-4c15-a**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 99.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378614

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Randy M Gold

Mailing Address 1436 Haigs Creek Dr

City: Elgin State: SC Zip Code: 29045

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 110.00

**Transaction ID : e29094ca-2a1b-4707-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Randy M Gold

Mailing Address 1436 Haigs Creek Dr

City: Elgin State: SC Zip Code: 29045

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 53.61

**Transaction ID : d1504dac-66d6-4f0b-9**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 163.61

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kaleigh J Wagner

Mailing Address 18065 Wayne Rd

City: Odessa State: FL Zip Code: 33556

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 110.00

**Transaction ID : aeab4415-8527-47e3-b**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 100.00

**Transaction ID : 95989e33-11ce-4759-9**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 210.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378616

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City Raleigh | State NC | Zip Code 27604

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
13.20

**Transaction ID : 488499d1-f83d-40da-9**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City New Orleans | State LA | Zip Code 70131

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
40.00

**Transaction ID : f95c75c2-0861-46e4-a**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 53.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 5.10

**Transaction ID : dead9cac-1f2d-4850-b**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Mattie Harris

Mailing Address 3654 Tara St

City: springdale State: AR Zip Code: 72762

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 20.00

**Transaction ID : 990534c2-cce3-49c1-b**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 25.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378618

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mattie Harris

Mailing Address 3654 Tara St

City springdale State AR Zip Code 72762

Purpose of Expenditure Mileage

Category/Type 002

Date of Public Distribution/Dissemination 08 / 23 / 2014

Amount 5.70

**Transaction ID : 1dfa83e3-76ff-44fe-9**

Date of Disbursement or Obligation 08 / 23 / 2014

Name of Federal Candidate Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City Eden State NC Zip Code 27288

Purpose of Expenditure Salary

Category/Type 001

Date of Public Distribution/Dissemination 08 / 23 / 2014

Amount 72.50

**Transaction ID : 2f0518e1-ab38-4e3b-a**

Date of Disbursement or Obligation 08 / 23 / 2014

Name of Federal Candidate Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 78.20

**(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378619

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City Eden | State NC | Zip Code 27288

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
9.00

**Transaction ID : 07706cfb-854a-40c1-a**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Amelia Brackett

Mailing Address 804 Roundabout Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
20.00

**Transaction ID : bfe02078-dc44-4ca7-a**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 29.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378620

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brandon Wheeler

Mailing Address 10112 Piney Creek Ct

City: Charolette State: NC Zip Code: 28215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 40.00

**Transaction ID : 1edcd455-9823-4041-9**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Thomas Dias

Mailing Address 110 Maryella Dr

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 50.00

**Transaction ID : 0a4e7683-9c2c-48bf-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 90.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378621

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Thomas Dias

Mailing Address 110 Maryella Dr

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 29.10

**Transaction ID : 13f0b713-736a-4374-b**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 40.00

**Transaction ID : bf62c07a-9481-4ba0-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 69.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378622

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 19.50

**Transaction ID : dd07eaed-bd08-4d37-a**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tarrin Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 70.00

**Transaction ID : 51f41bbc-feef-4acb-b**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378623

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tarrin Lesaicherre

Mailing Address 629 Radiance Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 3.60

**Transaction ID : 3a43efc7-29d5-4e45-9**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brandon Guttuso

Mailing Address 3013 Transcontinental Dr

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 70.00

**Transaction ID : 26e95d04-f756-4bcd-a**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 73.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378624

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brandon Guttuso

Mailing Address 3013 Transcontinental Dr

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 3.60

**Transaction ID : ddb7575d-c90a-4fce-9**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 30.00

**Transaction ID : f8a44215-0813-4c59-9**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 33.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378625

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jazmine d Conner

Mailing Address 100 ASBURY CT

City WINCHESTER State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 24 / 2014

Amount
30.00

**Transaction ID : 94c2b427-3401-4b08-b**

Date of Disbursement or Obligation
08 / 24 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City Winchester State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 24 / 2014

Amount
30.00

**Transaction ID : c60a784e-ab16-48da-b**

Date of Disbursement or Obligation
08 / 24 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 60.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378626

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 30.00

**Transaction ID : a7a2105d-7fb0-4981-8**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rodney D Culbreth

Mailing Address 100 Asbury CT
3200 Dam Neck Rd

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 30.00

**Transaction ID : ed9d0582-685f-481c-a**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 60.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378627

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rze Culbreath

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 30.00

**Transaction ID : fa781844-ef2c-45a6-9**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Chinchar

Mailing Address 2730 Dave Ward Dr

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 30.00

**Transaction ID : 52c522ad-f425-4212-9**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 60.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378628

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Chinchar

Mailing Address 2730 Dave Ward Dr

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 6.00

**Transaction ID : 634a7e56-445d-4d09-9**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 40.00

**Transaction ID : d35b55fe-78cb-4f63-b**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 46.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378629

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 5.64

**Transaction ID : a9230ff7-0120-4ceb-8**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Randy M Gold

Mailing Address 1436 Haigs Creek Dr

City: Elgin State: SC Zip Code: 29045

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 60.00

**Transaction ID : 1f139b1c-68d9-4616-b**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 65.64

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378630

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Randy M Gold

Mailing Address 1436 Haigs Creek Dr

City: Elgin State: SC Zip Code: 29045

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 46.29

**Transaction ID : 2fb2450f-6729-4a0d-a**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kaleigh J Wagner

Mailing Address 18065 Wayne Rd

City: Odessa State: FL Zip Code: 33556

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 60.00

**Transaction ID : 1b37d845-e539-489b-9**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 106.29

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shelbi L Randall

Mailing Address 202 East Park Ave Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 35.00

**Transaction ID : bf91bab1-d5cf-4242-9**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shelbi L Randall

Mailing Address 202 East Park Ave Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 35.25

**Transaction ID : 482f6b43-76ec-4863-a**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 70.25

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378632

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Taylor N Randall

Mailing Address
2002 E Park Ave
Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 45.00

**Transaction ID : 9e753de1-6122-416c-a**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joneisha Stewart

Mailing Address
2329 Runnymede Dr

City: Marrero State: LA Zip Code: 70072

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 70.00

**Transaction ID : 1390ea43-7867-4f10-9**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 115.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378633

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jacob L Colbert

Mailing Address 49 Sharon Circle

City: Greenbrier State: AR Zip Code: 72058

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 15.00

**Transaction ID : 953001f7-98bc-44d2-b**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jacob L Colbert

Mailing Address 49 Sharon Circle

City: Greenbrier State: AR Zip Code: 72058

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 12.00

**Transaction ID : 67e3b544-bde8-486b-b**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 27.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378634

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nathan Smith

Mailing Address 1247 W Mt Comfort Rd

City: Fayatteville State: AR Zip Code: 72703

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 22.50

**Transaction ID : 1b348582-38b1-4d60-b**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nathan Smith

Mailing Address 1247 W Mt Comfort Rd

City: Fayatteville State: AR Zip Code: 72703

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 7.38

**Transaction ID : c31abac1-0b1e-4e4b-a**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 29.88

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378635

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte | State: LA | Zip Code: 70586

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 50.00

**Transaction ID : 4ba445a6-c980-444b-a**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte | State: LA | Zip Code: 70586

Purpose of Expenditure: Mileage | Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 39.00

**Transaction ID : b2cc8e7b-6a17-4a19-9**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 89.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378636

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kinsey E Beck

Mailing Address 103 Glenhaven Ct

City Harvest | State AL | Zip Code 35749

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 24 / 2014

Amount
50.00

**Transaction ID : e1289c8c-e3df-474f-9**

Date of Disbursement or Obligation
08 / 24 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kinsey E Beck

Mailing Address 103 Glenhaven Ct

City Harvest | State AL | Zip Code 35749

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 24 / 2014

Amount
40.50

**Transaction ID : 34c1e493-2399-4810-8**

Date of Disbursement or Obligation
08 / 24 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 90.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378637

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Heather N Montgomery

Mailing Address 106 Wyncrest Ct

City: Hendersonville State: TN Zip Code: 37075

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 50.00

**Transaction ID : 4c8cf685-f8ea-4f1d-8**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
David M Bozeman

Mailing Address 768 Pine Haven Drive

City: Fayetteville State: NC Zip Code: 28306

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 5.00

**Transaction ID : 3c24e993-b3ee-4d85-8**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 55.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378638

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David M Bozeman

Mailing Address 768 Pine Haven Drive

City Fayetteville | State NC | Zip Code 28306

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 24 / 2014

Amount
0.30

**Transaction ID : 4b28eed3-1d43-4950-8**

Date of Disbursement or Obligation
08 / 24 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City Eden | State NC | Zip Code 27288

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 24 / 2014

Amount
35.00

**Transaction ID : 116f1c5f-c900-4ccf-9**

Date of Disbursement or Obligation
08 / 24 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 35.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378639

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 7.20

**Transaction ID : 6e0ea265-4313-446d-8**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 60.00

**Transaction ID : 7c73575e-9929-485f-8**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 67.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 6.60

**Transaction ID : 298f4ada-db22-4d8d-9**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Xavier Miller

Mailing Address 407 randall Dr

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 50.00

**Transaction ID : ac8904a7-adda-4061-8**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 56.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378641

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Xavier Miller

Mailing Address 407 randall Dr

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 30.90

**Transaction ID : cb3b5884-8c8f-4d8d-8**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mr. Elizabeth Allison

Mailing Address 157 Bishop Drive

City: Avondale State: LA Zip Code: 70094

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 17.50

**Transaction ID : 028762c6-90b2-4f4c-b**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 48.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378642

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Laura Rose Porter

Mailing Address 227 Fairgrounds Road

City: Natchitoches State: LA Zip Code: 71457

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 17.50

**Transaction ID : fdc0d6bf-5483-4d5f-a**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Laura Rose Porter

Mailing Address 227 Fairgrounds Road

City: Natchitoches State: LA Zip Code: 71457

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 3.90

**Transaction ID : 926cc1db-9e21-4786-a**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 21.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378643

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 24 / 2014

Amount
65.00

**Transaction ID : 0f02f3d1-8d21-4ae2-a**

Date of Disbursement or Obligation
08 / 24 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 24 / 2014

Amount
1.50

**Transaction ID : dc7d85fc-78fd-475f-b**

Date of Disbursement or Obligation
08 / 24 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 66.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378644

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Vonniqua Jackson

Mailing Address
111 Westchester Blvd
Apt D4

City: Slidell
State: LA
Zip Code: 70458

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 60.00

**Transaction ID : 46af2c49-84d6-4dab-b**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address
220 Doucet Rd

City: Lafayette
State: LA
Zip Code: 70503

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 35.00

**Transaction ID : 7ad1a6e5-8c43-4a74-b**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 95.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 2.52

**Transaction ID : fa37e704-6f24-4bc6-b**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 80.00

**Transaction ID : 148e7447-a2c2-4347-a**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 82.52

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 12.30

**Transaction ID : fffa790f-6b10-4cd7-b**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Alexa S Dudley

Mailing Address 4367 Splitlog Rd

City: Goodman State: MO Zip Code: 64843

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 20.00

**Transaction ID : 4e22b74c-b761-45b3-b**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 32.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378647

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Alexa S Dudley

Mailing Address 4367 Splitlog Rd

City: Goodman State: MO Zip Code: 64843

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 24.60

**Transaction ID : 79c17603-f5b9-4fed-8**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 55.00

**Transaction ID : 8bb2fc3e-d481-4fb2-b**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 79.60

(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 28.50

**Transaction ID : 608a3671-fee2-42f2-9**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 50.00

**Transaction ID : 4073151d-a664-4b7e-8**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 78.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378649

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 10.50

**Transaction ID : ebd31022-97f6-43f9-b**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James E Dacus

Mailing Address 117 Cynthia Ave

City: Farmington State: AR Zip Code: 72730

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 20.00

**Transaction ID : ea458d5e-a1e7-47a4-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 30.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378650

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
45.00

**Transaction ID : caad9920-5f99-45a3-8**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 22 / 2014

Amount
17.40

**Transaction ID : 7e82d72c-c8c3-43f9-9**

Date of Disbursement or Obligation
08 / 22 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 62.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nathan D Wirebaugh

Mailing Address 7320 Red Maple Dr

City Holland State OH Zip Code 43528

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
45.00

**Transaction ID : f16e5f38-f255-4b8a-b**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City High Point State NC Zip Code 27260

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 24 / 2014

Amount
45.00

**Transaction ID : ec7b906f-4941-433f-b**

Date of Disbursement or Obligation
08 / 24 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 90.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378652

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 24 / 2014

Amount: 18.00

**Transaction ID : 19228299-b8b6-4ed9-9**

Date of Disbursement or Obligation: 08 / 24 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eric J Smith

Mailing Address 4967 Dysartville

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 80.00

**Transaction ID : 0e67c579-9a29-4f2d-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 98.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378653

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City Morganton State NC Zip Code 28655

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
80.00

**Transaction ID : cefb7fde-ee5a-4450-b**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City Morganton State NC Zip Code 28655

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
9.00

**Transaction ID : 78e6278a-66bb-4ba2-9**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378654

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Casey Stockton

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 45.00

**Transaction ID : 4df6dd56-72d3-48c0-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Casey Stockton

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 20.10

**Transaction ID : 7c8e1ea9-aa20-4308-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 65.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378655

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 45.00

**Transaction ID : ba94b736-0706-4b76-b**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 12.90

**Transaction ID : d295a3fa-95ac-4880-b**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 57.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378656

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Sharon t Craig

Mailing Address 1410 Bushville Dr

City Lenoir | State NC | Zip Code 28645

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
30.00

**Transaction ID : e310dee9-78b0-40a2-8**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Sharon t Craig

Mailing Address 1410 Bushville Dr

City Lenoir | State NC | Zip Code 28645

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
6.00

**Transaction ID : f5dee322-f73e-4b00-a**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 36.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378657

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Sharon t Craig

Mailing Address 1410 Bushville Dr

City Lenoir | State NC | Zip Code 28645

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
30.00

**Transaction ID : 8cb1dfaa-85a0-428d-a**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Sharon t Craig

Mailing Address 1410 Bushville Dr

City Lenoir | State NC | Zip Code 28645

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
6.00

**Transaction ID : e82eadcb-d78e-4ec5-9**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 36.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378658

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Majority Connections

Mailing Address 10 Pinnacle Rd

City Durham | State NC | Zip Code 27705

Purpose of Expenditure
Online Advertising

Category/Type 004

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
500.00

**Transaction ID : 1dfdb3bd-c507-46b2-b**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Design 4 Advertising, Inc.

Mailing Address 106 N Collins St

City Plant City | State FL | Zip Code 33563

Purpose of Expenditure
Design

Category/Type 004

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
150.00

**Transaction ID : 00effa96-6e9c-4ac8-b**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 650.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378659

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Adam Rock

Mailing Address 307 Farris Rd Apt 1

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 40.00

**Transaction ID : a303aa18-7bf6-4000-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Adam Rock

Mailing Address 307 Farris Rd Apt 1

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 4.50

**Transaction ID : 52335bfe-781c-4a33-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 44.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378660

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City: Sterling State: VA Zip Code: 20165

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 10.00

**Transaction ID : b1afc2cd-9772-4756-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joseph P Thierfelder

Mailing Address 2411 Armstrong

City: Gastonia State: NC Zip Code: 28054

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 64.00

**Transaction ID : 7ab04864-00a9-4f33-b**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 74.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378661

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joseph P Thierfelder

Mailing Address 2411 Armstrong

City: Gastonia State: NC Zip Code: 28054

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 15.30

**Transaction ID : 0cf2cba9-d478-42e5-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Laura U Logie

Mailing Address 2565 Shire Circle

City: Harrisonburg State: VA Zip Code: 22801

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 20.00

**Transaction ID : 60efa17e-396e-4724-8**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 35.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378662

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amanda Boley

Mailing Address
Split Oak Drive

City: charlotte
State: NC
Zip Code: 28227

Purpose of Expenditure
Salary

Category/Type: 001

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
55.00

**Transaction ID : 87a0e2cc-3666-4d05-8**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Amanda Boley

Mailing Address
Split Oak Drive

City: charlotte
State: NC
Zip Code: 28227

Purpose of Expenditure
Mileage

Category/Type: 002

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
24.90

**Transaction ID : 380a8308-4f79-4240-a**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 79.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378663

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brandon Wheeler

Mailing Address 10112 Piney Creek Ct

City: Charolette State: NC Zip Code: 28215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 45.00

**Transaction ID : 10f61b15-77f8-45a3-b**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brandon Wheeler

Mailing Address 10112 Piney Creek Ct

City: Charolette State: NC Zip Code: 28215

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 24.00

**Transaction ID : e6029a3f-69f3-4071-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 69.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378664

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 90.00

**Transaction ID : 382c97c9-0c8f-4d28-8**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 9.60

**Transaction ID : 9b9d8d2d-1b00-46f1-b**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 99.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378665

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City Shelby | State NC | Zip Code 28152

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
70.00

**Transaction ID : 2544ae4f-4ca9-41f6-9**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City Shelby | State NC | Zip Code 28152

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
25.65

**Transaction ID : 6ab95c86-031b-4e4e-9**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 95.65

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378666

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 15.00

**Transaction ID : 765c6c01-7a1a-4fba-8**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 0.60

**Transaction ID : cff1c91a-9c93-4abc-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 15.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378667

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lucas H Hoyle

Mailing Address 282 Falls Ave

City: Granite Falls State: NC Zip Code: 28630

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 30.00

**Transaction ID : 8f200096-4aa0-46c6-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lucas H Hoyle

Mailing Address 282 Falls Ave

City: Granite Falls State: NC Zip Code: 28630

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 11.70

**Transaction ID : e2e8ba74-4d66-46ef-8**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 41.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378668

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City Spindale | State NC | Zip Code 28160

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
62.50

**Transaction ID : 31196a24-35de-49c9-a**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City Spindale | State NC | Zip Code 28160

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
24.93

**Transaction ID : 1bd3b0d2-9bfd-429d-9**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 87.43

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378669

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Morgan E Hallenbeck

Mailing Address 3790 Christian Light Rd

City: Fuquay Varina State: NC Zip Code: 27526

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 40.00

**Transaction ID : a23bf036-c82e-4a59-b**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Morgan E Hallenbeck

Mailing Address 3790 Christian Light Rd

City: Fuquay Varina State: NC Zip Code: 27526

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 34.50

**Transaction ID : 52390ae2-3a7d-4fa1-8**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 74.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378670

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 50.00

**Transaction ID : 2e4934ba-da1b-4a90-8**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 21.90

**Transaction ID : bd469e5e-b9c2-4460-8**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 71.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378671

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Peggy A Sides

Mailing Address 2183 Spokane Rd

City: Fayetteville State: NC Zip Code: 28304

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 80.00

**Transaction ID : d89942df-2a2c-4755-8**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Peggy A Sides

Mailing Address 2183 Spokane Rd

City: Fayetteville State: NC Zip Code: 28304

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 9.00

**Transaction ID : 1981db68-a61a-40b1-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378672

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jacob S Mann

Mailing Address 3875 Old Stage Rd S

City: Erwin State: NC Zip Code: 28339

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 40.00

**Transaction ID : d1166e61-7dac-4ec7-b**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jacob S Mann

Mailing Address 3875 Old Stage Rd S

City: Erwin State: NC Zip Code: 28339

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 34.50

**Transaction ID : 6349045c-6c49-476a-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 74.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378673

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Caleb Craig

Mailing Address 1410 Bushville drive

City: Lenoir State: NC Zip Code: 28645

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 60.00

**Transaction ID : 206a50b9-38a5-4626-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Caleb Craig

Mailing Address 1410 Bushville drive

City: Lenoir State: NC Zip Code: 28645

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 14.40

**Transaction ID : 25060682-055e-4a11-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 74.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378674

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 46.60

**Transaction ID : 333da29d-264e-4cd0-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 34.11

**Transaction ID : 0dc1781b-ab6c-4f46-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 80.71

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378675

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brenda L Dawson

Mailing Address 6021 General Samuel Rd

City: Jacksonville State: AR Zip Code: 72076

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 15.00

**Transaction ID : 96a09432-5900-4d53-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brenda L Dawson

Mailing Address 6021 General Samuel Rd

City: Jacksonville State: AR Zip Code: 72076

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 4.80

**Transaction ID : aadb1a0f-ba88-4643-8**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 19.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378676

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
80.00

**Transaction ID : 6a225fd8-c7df-4d37-8**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
21.00

**Transaction ID : cfd33762-53b2-49e0-b**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 101.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378677

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City: Shreveport State: LA Zip Code: 71104

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 60.00

**Transaction ID : be0d227c-6422-4c8c-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City: Shreveport State: LA Zip Code: 71104

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 16.50

**Transaction ID : 04947767-a882-4f8a-b**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 76.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378678

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lesley Lennox

Mailing Address 2305 Cleary Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 12.50

**Transaction ID : 771aa74a-242e-4b45-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lesley Lennox

Mailing Address 2305 Cleary Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 3.00

**Transaction ID : a560edd8-574d-438d-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 15.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378679

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City Ville Platte | State LA | Zip Code 70586

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
50.00

**Transaction ID : ea87a368-0e5b-414e-8**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City Ville Platte | State LA | Zip Code 70586

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
23.70

**Transaction ID : f063d148-764f-43fc-9**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 73.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378680

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 20.00

**Transaction ID : 027c7e90-6ed3-494e-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 7.50

**Transaction ID : eb0ebb06-f41e-4e04-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 27.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378681

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City Raleigh | State NC | Zip Code 27610

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
21.50

**Transaction ID : 2d4abd80-425d-4546-b**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City Raleigh | State NC | Zip Code 27610

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
4.20

**Transaction ID : f26d0e40-1a5d-41d4-a**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 25.70

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378682

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nathan D Wirebaugh

Mailing Address 7320 Red Maple Dr

City Holland State OH Zip Code 43528

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
40.00

**Transaction ID : 38b9a3fb-3d1d-43a6-a**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City Raleigh State NC Zip Code 27604

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
105.00

**Transaction ID : 0865f60c-347a-4371-a**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 145.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378683

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City Raleigh | State NC | Zip Code 27604

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
23.70

**Transaction ID : e9409b7d-98e9-4249-8**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City Little Rock | State AR | Zip Code 72212

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
40.00

**Transaction ID : 5ad8bc75-6eb4-4142-b**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 63.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378684

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 10.80

**Transaction ID : d5f54ce5-fd82-4e0e-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 40.00

**Transaction ID : 1c43eb1b-13e7-44e9-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 50.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378685

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 8.40

**Transaction ID : e9ca2ab8-3abc-48ff-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Chinchar

Mailing Address 2730 Dave Ward Dr

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 20.00

**Transaction ID : 00dad131-6a8f-4e37-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 28.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378686

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Chinchar

Mailing Address 2730 Dave Ward Dr

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 5.40

**Transaction ID : db4838b0-f1ed-47e9-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Logan B Piper

Mailing Address 3205 Pebble Beach Rd

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 32.00

**Transaction ID : 0aa0c0ae-e4f3-4775-b**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 37.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378687

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Logan B Piper

Mailing Address 3205 Pebble Beach Rd

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 1.92

**Transaction ID : 5052cb0e-78f0-4d1c-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shelbi L Randall

Mailing Address 202 East Park Ave Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 45.00

**Transaction ID : f435859b-bd10-429e-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 46.92

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378688

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shelbi L Randall

Mailing Address 202 East Park Ave Apt 40

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
27.72

**Transaction ID : 89d57f8e-7d24-4316-8**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Stephanie L Heun

Mailing Address 8026 S Wilwood Dr Apt 101

City Oak Creek | State WI | Zip Code 53154

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
40.00

**Transaction ID : 0b0f9b80-ab9a-45a3-a**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 67.72

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378689

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francesca Blom

Mailing Address 101 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 20.00

**Transaction ID : 6a2fe929-3777-41db-b**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Randy M Gold

Mailing Address 1436 Haigs Creek Dr

City: Elgin State: SC Zip Code: 29045

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 45.00

**Transaction ID : 51817a35-96f7-4a62-b**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 65.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378690

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Randy M Gold

Mailing Address 1436 Haigs Creek Dr

City: Elgin State: SC Zip Code: 29045

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 32.01

**Transaction ID : 44231cd5-770b-48d3-8**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City: Search State: AR Zip Code: 72149

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 20.00

**Transaction ID : 5c33211d-3b55-44f0-8**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 52.01

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City: Search State: AR Zip Code: 72149

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 18.90

**Transaction ID : ca723355-b68d-4a20-b**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kaleigh J Wagner

Mailing Address 18065 Wayne Rd

City: Odessa State: FL Zip Code: 33556

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 45.00

**Transaction ID : 4d257c31-0265-41be-b**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 63.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378692

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Miller

Mailing Address 718 Azalea Dr.
Unit 453

City: Hampstead State: NC Zip Code: 28443

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 41.50

**Transaction ID : 4d5666a4-36fe-4fc5-b**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lisa Miller

Mailing Address 718 Azalea Dr.
Unit 453

City: Hampstead State: NC Zip Code: 28443

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 8.22

**Transaction ID : 3e6aa569-5317-41bd-8**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 49.72

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378693

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
60.00

**Transaction ID : 18450419-26b4-4939-b**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
1.20

**Transaction ID : 8353b17f-102f-4b0e-b**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 61.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378694

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 20.00

**Transaction ID : fbe7d58e-f71e-42d1-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 13.50

**Transaction ID : 4d886b20-cd0f-43ac-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 33.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378695

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 100.00

**Transaction ID : 098155a3-4e93-4a4b-8**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 32.40

**Transaction ID : 1401c315-2100-447f-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 132.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378696

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Vonniqua Jackson

Mailing Address
111 Westchester Blvd
Apt D4

City: Slidell
State: LA
Zip Code: 70458

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 50.00

**Transaction ID : ca2f93ae-9c70-4914-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brenda L McCune

Mailing Address
1254 Fleming St Apt 6

City: Conway
State: AR
Zip Code: 72032

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 65.00

**Transaction ID : 62415957-5019-4898-8**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 115.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378697

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brenda L McCune

Mailing Address 1254 Fleming St Apt 6

City: Conway State: AR Zip Code: 72032

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 31.20

**Transaction ID : 387d023c-1279-433a-b**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 50.00

**Transaction ID : 71be61da-c8dc-460e-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 81.20

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378698

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 23.40

**Transaction ID : 541367d9-09fe-4178-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 50.00

**Transaction ID : 34c819bf-c1d2-407b-b**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 73.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378699

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 23.40

**Transaction ID : 2aee9520-a26d-483f-8**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 50.00

**Transaction ID : 2bcbb9e5-d0be-4ea5-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 73.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378700

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 23.40

**Transaction ID : 452b8d4b-d3b2-4e1d-8**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 80.00

**Transaction ID : 52092bd6-fd3a-400d-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 103.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378701

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 28.59

**Transaction ID : f644d90c-67b8-4da2-b**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City: Greensboro State: NC Zip Code: 27410

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 60.00

**Transaction ID : 377db9f5-b737-4170-b**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 88.59

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378702

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Daniel E Collison

Date of Public Distribution/Dissemination
08 / 25 / 2014

Mailing Address 3315 Cardinal Ridge Rd

Amount
18.30

City Greensboro | State NC | Zip Code 27410

**Transaction ID : 65de97bd-f5f9-485b-b**

Purpose of Expenditure
Mileage

Category/Type 002

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Tracy M Hargett

Date of Public Distribution/Dissemination
08 / 25 / 2014

Mailing Address 5133 Lord Bryon Road

Amount
45.00

City Wilmington | State NC | Zip Code 28405

**Transaction ID : 30196d54-c126-44cc-9**

Purpose of Expenditure
Salary

Category/Type 001

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 63.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378703

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City: Wilmington State: NC Zip Code: 28405

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 19.80

**Transaction ID : 12108377-6c91-42b8-8**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 105.00

**Transaction ID : 0d1fbbe7-e884-4c2c-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 124.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378704

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Phillip Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
37.50

**Transaction ID : 2d575b70-bc6e-412d-b**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Beverly Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
105.00

**Transaction ID : 8828758f-eab2-4feb-9**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 142.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378705

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 70.00

**Transaction ID : 7cec43ee-8d9e-46b9-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Jazmine d Conner

Mailing Address 100 ASBURY CT

City: WINCHESTER State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 60.00

**Transaction ID : 960490dd-db0c-49bb-8**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 130.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378706

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 60.00

**Transaction ID : 93a988a0-b8aa-49dd-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 70.00

**Transaction ID : c753d869-9975-429c-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 130.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378707

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney D Culbreth

Date of Public Distribution/Dissemination
08 / 25 / 2014

Mailing Address
100 Asbury CT
3200 Dam Neck Rd

Amount
70.00

City: Winchester
State: VA
Zip Code: 22602

**Transaction ID : d1ec2020-f96a-4f35-a**

Purpose of Expenditure
Salary

Category/Type: 001

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rze Culbreath

Date of Public Distribution/Dissemination
08 / 25 / 2014

Mailing Address
100 Asbury Ct

Amount
70.00

City: Winchester
State: VA
Zip Code: 22602

**Transaction ID : 1b011d06-10e4-4001-a**

Purpose of Expenditure
Salary

Category/Type: 001

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 140.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378708

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Theresa a Youngblood

Mailing Address 102 S Main Street Apt A2

City: Berryville State: VA Zip Code: 22611

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 50.00

**Transaction ID : 27dcda3a-5b7e-4b15-8**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Amelia Brackett

Mailing Address 804 Roundabout Circle

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 30.00

**Transaction ID : 67cf450b-9584-4a28-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 80.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378709

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 80.00

**Transaction ID : babec8ed-9117-4fde-8**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 15.00

**Transaction ID : d0dd9b77-e451-468d-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 95.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378710

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mattie Harris

Mailing Address 3654 Tara St

City springdale State AR Zip Code 72762

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
40.00

**Transaction ID : 47f82a63-a510-4c80-a**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mattie Harris

Mailing Address 3654 Tara St

City springdale State AR Zip Code 72762

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
6.24

**Transaction ID : 3622b12d-a1db-4195-8**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 46.24

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378711

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Beau Autin

Mailing Address 345 Auroura Ave

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 40.00

**Transaction ID : 585c3811-d682-4526-b**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Beau Autin

Mailing Address 345 Auroura Ave

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 4.32

**Transaction ID : 242afcd5-3373-4523-b**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 44.32

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378712

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 70.00

**Transaction ID : 677bb06d-13b0-4510-8**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 18.60

**Transaction ID : 81052702-a6d5-4171-b**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 88.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378713

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 70.00

**Transaction ID : 5fb5bb09-f486-4707-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 19.20

**Transaction ID : 1d96f20a-362c-4d7e-8**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378714

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
50.00

**Transaction ID : 800e78ad-e53b-4243-b**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
20.40

**Transaction ID : 63de9dc2-3950-4170-8**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 70.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378715

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Wayne Burckel

Mailing Address 46 Glenwood Ave

City Harahan | State LA | Zip Code 70123

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
50.00

**Transaction ID : 52509f83-9af7-4b50-8**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Wayne Burckel

Mailing Address 46 Glenwood Ave

City Harahan | State LA | Zip Code 70123

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
0.90

**Transaction ID : becfecf2-210d-4892-8**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 50.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378716

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Darius Beverly

Mailing Address 157 Bishop Drive

City Avondale | State LA | Zip Code 70094

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
45.00

**Transaction ID : 0c227f59-53e6-458a-a**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James Tatro

Mailing Address 1208 Braeburn Rd

City Charlotte | State NC | Zip Code 28211

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
80.00

**Transaction ID : aaa3af91-a174-41dc-9**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 125.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378717

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Tatro

Date of Public Distribution/Dissemination
08 / 25 / 2014

Mailing Address 1208 Braeburn Rd

Amount
5.70

City: Charlotte State: NC Zip Code: 28211

**Transaction ID : 021fced3-6f10-4f32-b**

Purpose of Expenditure
Mileage

Category/Type 002

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Ms. Dinah Beverly

Date of Public Distribution/Dissemination
08 / 25 / 2014

Mailing Address 157 Bishop Drive

Amount
45.00

City: Avondale State: LA Zip Code: 70064

**Transaction ID : 6d21ff1d-1e5c-409c-9**

Purpose of Expenditure
Salary

Category/Type 001

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 50.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Dinah Beverly

Mailing Address 157 Bishop Drive

City: Avondale State: LA Zip Code: 70064

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 5.10

**Transaction ID : 7468f7f0-6a09-4943-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Linda J Fueling

Mailing Address 6424 Purple Martin Ct

City: Wilmington State: NC Zip Code: 28411

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 33.00

**Transaction ID : 47b9afe1-1663-4d19-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 38.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378719

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on MM / DD / YYYY

Full Name of Payee
Linda J Fueling

Mailing Address 6424 Purple Martin Ct

City: Wilmington State: NC Zip Code: 28411

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 19.92

**Transaction ID : d4f6a4b0-0d25-4298-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
David M Bozeman

Mailing Address 768 Pine Haven Drive

City: Fayetteville State: NC Zip Code: 28306

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 10.00

**Transaction ID : 06373528-d738-4e80-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 29.92

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David M Bozeman

Mailing Address 768 Pine Haven Drive

City: Fayetteville State: NC Zip Code: 28306

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 0.60

**Transaction ID : 62dd0723-c067-441e-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eric J Smith

Mailing Address 4967 Dysartville

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 80.00

**Transaction ID : 1589eb5e-da55-4201-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 80.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378721

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 80.00

**Transaction ID : e9f82ed2-4cd0-457e-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 7.50

**Transaction ID : 6cf8207e-9c24-4a68-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 87.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378722

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Holly M Tippett

Mailing Address 595 Saint Gabrielle Dr

City Florissant State MO Zip Code 63033

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
30.00

**Transaction ID : 91d0029d-be86-41b9-a**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Holly M Tippett

Mailing Address 595 Saint Gabrielle Dr

City Florissant State MO Zip Code 63033

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 25 / 2014

Amount
19.71

**Transaction ID : 6241315d-f54c-45fc-a**

Date of Disbursement or Obligation
08 / 25 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 49.71

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378723

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Sharon t Craig

Mailing Address 1410 Bushville Dr

City: Lenoir State: NC Zip Code: 28645

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 45.00

**Transaction ID : 7ef7b24f-2059-41f4-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Sharon t Craig

Mailing Address 1410 Bushville Dr

City: Lenoir State: NC Zip Code: 28645

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 10.50

**Transaction ID : c7e68c87-0e52-43ce-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 55.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378724

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Morgan E Hallenbeck

Mailing Address 3790 Christian Light Rd

City: Fuquay Varina State: NC Zip Code: 27526

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 45.00

**Transaction ID : 8a87addb-0b2a-4369-9**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Morgan E Hallenbeck

Mailing Address 3790 Christian Light Rd

City: Fuquay Varina State: NC Zip Code: 27526

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 11.70

**Transaction ID : c916134d-3302-4747-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 56.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378725

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 40.00

**Transaction ID : de2945f4-d408-4fbc-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 13.80

**Transaction ID : 24eff877-cc53-428d-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 53.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378726

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Logan B Piper

Mailing Address 3205 Pebble Beach Rd

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 12.70

**Transaction ID : 8af4a8f8-ac64-4e11-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Logan B Piper

Mailing Address 3205 Pebble Beach Rd

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 3.27

**Transaction ID : b6a0edd5-3aa2-40fc-9**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 15.97

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378727

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Dwayne C Smith

Mailing Address 900 Bramblegate Rd

City: Hope Mills State: NC Zip Code: 28348

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 45.00

**Transaction ID : 2db7d054-4cb0-4337-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Dwayne C Smith

Mailing Address 900 Bramblegate Rd

City: Hope Mills State: NC Zip Code: 28348

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 6.90

**Transaction ID : 749e4063-9e36-417a-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 51.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378728

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 65.00

**Transaction ID : 114b4f0f-0869-499a-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joseph R Rys

Mailing Address 160 #50 Pompano Dr

City: New Bern State: NC Zip Code: 28560

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 6.06

**Transaction ID : c3c505ff-5eb9-4321-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 71.06

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378729

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jodi Fountain

Mailing Address 1010 S Dogwood Drive

City: Bogalusa State: LA Zip Code: 70427

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 35.00

**Transaction ID : 98a22ef3-43ed-4cf8-9**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jodi Fountain

Mailing Address 1010 S Dogwood Drive

City: Bogalusa State: LA Zip Code: 70427

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 8.70

**Transaction ID : dde8cfc7-ea38-40c7-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 43.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378730

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City Shelby | State NC | Zip Code 28152

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
60.00

**Transaction ID : 7ea420d9-f094-4d99-b**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City Shelby | State NC | Zip Code 28152

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
27.30

**Transaction ID : 8fadbe96-a3b6-487c-9**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 87.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378731

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Logan B Piper

Mailing Address 3205 Pebble Beach Rd

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 20.00

**Transaction ID : a5d17ee7-3a02-4338-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Logan B Piper

Mailing Address 3205 Pebble Beach Rd

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 2.82

**Transaction ID : 01088298-9b65-4be6-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 22.82

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378732

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Caleb Craig

Mailing Address 1410 Bushville drive

City: Lenoir State: NC Zip Code: 28645

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 100.00

**Transaction ID : 2b785965-4979-443f-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Caleb Craig

Mailing Address 1410 Bushville drive

City: Lenoir State: NC Zip Code: 28645

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 11.10

**Transaction ID : ebc240b6-394b-477a-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 111.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378733

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lucas H Hoyle

Mailing Address 282 Falls Ave

City: Granite Falls State: NC Zip Code: 28630

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 20.00

**Transaction ID : 875155ce-3099-43d2-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lucas H Hoyle

Mailing Address 282 Falls Ave

City: Granite Falls State: NC Zip Code: 28630

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 11.10

**Transaction ID : a1fbb630-fa60-4555-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 31.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378734

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nicole N Ball

Mailing Address 2528 Mill Creek Rd

City Newport State NC Zip Code 28570

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
15.00

**Transaction ID : 88baeb9e-6bca-4d13-a**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Nicole N Ball

Mailing Address 2528 Mill Creek Rd

City Newport State NC Zip Code 28570

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
12.30

**Transaction ID : 1fbbe990-626a-48de-8**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 27.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City: Sterling State: VA Zip Code: 20165

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 30.00

**Transaction ID : 13f38309-703d-48c1-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 70.00

**Transaction ID : f33e874d-bec5-46da-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 100.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378736

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on MM / DD / YYYY

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 28.80

**Transaction ID : 94c96a3a-ff14-46ef-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eric Wilson

Mailing Address 907 Randall Drive

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 25.00

**Transaction ID : 0bad153e-cd66-4430-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 53.80

**(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eric Wilson

Mailing Address 907 Randall Drive

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
13.50

**Transaction ID : 81b9cfed-ddc1-4bd7-a**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Aaron L Griffin

Mailing Address 4830 Westin Park Drive

City Conway | State AR | Zip Code 72034

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
15.00

**Transaction ID : c43468eb-7c06-44bc-b**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 28.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378738

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Aaron L Griffin

Date of Public Distribution/Dissemination
08 / 26 / 2014

Mailing Address 4830 Westin Park Drive

Amount
3.00

City: Conway State: AR Zip Code: 72034

**Transaction ID : adb2de3b-92fc-49eb-b**

Purpose of Expenditure
Mileage

Category/Type 002

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Tymber D Crawley

Date of Public Distribution/Dissemination
08 / 26 / 2014

Mailing Address 6 Sherwood Dr

Amount
15.00

City: Conway State: AR Zip Code: 72034

**Transaction ID : 8526a783-2d99-495d-8**

Purpose of Expenditure
Salary

Category/Type 001

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 18.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378739

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tymber D Crawley

Date of Public Distribution/Dissemination
08 / 26 / 2014

Mailing Address 6 Sherwood Dr

Amount
3.00

City: Conway State: AR Zip Code: 72034

**Transaction ID : 58c26286-6e65-4de2-b**

Purpose of Expenditure
Mileage

Category/Type 002

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Donald Dessauer

Date of Public Distribution/Dissemination
08 / 26 / 2014

Mailing Address 1804 Auburn Ave

Amount
10.00

City: Metaire State: LA Zip Code: 70003

**Transaction ID : e8e06891-ed4a-440c-9**

Purpose of Expenditure
Salary

Category/Type 001

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 13.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378740

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 0.60

**Transaction ID : e0ed7fc4-8f6e-431b-9**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Amanda Boley

Mailing Address Split Oak Drive

City: charlotte State: NC Zip Code: 28227

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 50.00

**Transaction ID : a33f9a63-0ced-4039-9**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 50.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378741

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amanda Boley

Mailing Address
Split Oak Drive

City: charlotte
State: NC
Zip Code: 28227

Purpose of Expenditure
Mileage

Category/Type: 002

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
24.45

**Transaction ID : a13efe7f-630c-46f7-b**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
David Ford

Mailing Address
106 Hillside St

City: Spindale
State: NC
Zip Code: 28160

Purpose of Expenditure
Salary

Category/Type: 001

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
95.00

**Transaction ID : 30411c95-6c05-4972-a**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 119.45

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378742

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City Spindale | State NC | Zip Code 28160

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
29.82

**Transaction ID : 98e8ff44-f967-4d57-9**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City New Orleans | State LA | Zip Code 70116

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
60.00

**Transaction ID : b6d7a699-6390-43e4-9**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.82

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378743

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 13.50

**Transaction ID : 91e8b8aa-c589-472b-9**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Antoinette Franklin

Mailing Address 8822 Apple St

City: New Orleans State: LA Zip Code: 70188

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 40.00

**Transaction ID : 7315a9a7-ca5c-48fb-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 53.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378744

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Jean

Mailing Address 2012 Harrison Ave

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 85.00

**Transaction ID : ea392168-cb20-49f0-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Steven Jean

Mailing Address 2012 Harrison Ave

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 13.50

**Transaction ID : 7a19bfc4-983c-431e-9**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 98.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378745

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rebecca A Calvert

Mailing Address 20116 Medus St

City: Covington State: LA Zip Code: 70435

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 20.00

**Transaction ID : 28d8c9ce-6f54-48f6-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rebecca A Calvert

Mailing Address 20116 Medus St

City: Covington State: LA Zip Code: 70435

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 4.80

**Transaction ID : fcdec60f-81b7-4e82-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 24.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378746

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Peggy A Sides

Mailing Address 2183 Spokane Rd

City: Fayetteville State: NC Zip Code: 28304

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 80.00

**Transaction ID : 02698fee-b0b4-4299-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Peggy A Sides

Mailing Address 2183 Spokane Rd

City: Fayetteville State: NC Zip Code: 28304

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 10.50

**Transaction ID : 55756f12-2b08-4daf-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 90.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378747

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shantal C Culbreath

Mailing Address 4691 Hercules Lane

City Woodbridge State VA Zip Code 22193

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
100.00

**Transaction ID : 854bde5a-fcf9-4c13-a**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Theresa a Youngblood

Mailing Address 102 S Main Street Apt A2

City Berryville State VA Zip Code 22611

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
50.00

**Transaction ID : ca5936f2-584a-4642-a**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 150.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378748

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Melissa A Calvert

Mailing Address 20116 Medus St

City: Covington State: LA Zip Code: 70435

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 20.00

**Transaction ID : 113fbf27-53b8-424b-9**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lisa A Hackett

Mailing Address 137 S Palm ST

City: Winnabow State: NC Zip Code: 28479

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 36.00

**Transaction ID : d32500cb-c544-4331-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 56.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378749

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa A Hackett

Mailing Address 137 S Palm ST

City: Winnabow State: NC Zip Code: 28479

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 4.20

**Transaction ID : 1d42baff-d5ce-4fcd-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 70.00

**Transaction ID : 755ad995-9c89-4b08-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 74.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378750

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 28.80

**Transaction ID : 6853a396-dd33-4aa8-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Claire A Smith

Mailing Address 6610 Walcott Rd

City: Paragoud State: AR Zip Code: 72450

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 30.00

**Transaction ID : 17c53d24-5f23-43a3-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 58.80

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378751

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Claire A Smith

Mailing Address 6610 Walcott Rd

City: Paragoud State: AR Zip Code: 72450

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 21.72

**Transaction ID : bc56a8fb-0fa1-4221-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Warren Gravois

Mailing Address 16005 7th St

City: Pearlington State: MS Zip Code: 39572

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 20.00

**Transaction ID : 89b7cbc1-edb1-4c96-9**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 41.72

**(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Warren Gravois

Mailing Address 16005 7th St

City: Pearlington State: MS Zip Code: 39572

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 1.20

**Transaction ID : 79ae7242-d1e9-4561-9**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Laura U Logie

Mailing Address 2565 Shire Circle

City: Harrisonburg State: VA Zip Code: 22801

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 20.00

**Transaction ID : d1f7be1d-1f94-45fd-9**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 21.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378753

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Beau Autin

Mailing Address 345 Auroura Ave

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 70.00

**Transaction ID : 15da009a-c114-4596-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Beau Autin

Mailing Address 345 Auroura Ave

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 4.44

**Transaction ID : 17c9b09a-84de-4f1e-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 74.44

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378754

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Barbara E Spritz

Mailing Address 3346 Durham St Ext

City: Burlington State: NC Zip Code: 27217

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 45.00

**Transaction ID : 0b078df8-da3d-4b7a-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Barbara E Spritz

Mailing Address 3346 Durham St Ext

City: Burlington State: NC Zip Code: 27217

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 6.00

**Transaction ID : 9b90f27b-e6e9-4f7d-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 51.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378755

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Parker H Morrow

Mailing Address 506 N Horton Street

City Searcy State AR Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
40.00

**Transaction ID : 00e7d9f0-dc9c-4dc4-b**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Parker H Morrow

Mailing Address 506 N Horton Street

City Searcy State AR Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
24.00

**Transaction ID : 2a119062-e055-4e3f-9**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 64.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Adam Rock

Mailing Address 307 Farris Rd Apt 1

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 25.00

**Transaction ID : c5257e63-7910-4afb-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Adam Rock

Mailing Address 307 Farris Rd Apt 1

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 3.90

**Transaction ID : 7d67fd92-f9d9-4277-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 28.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378757

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City Newport | State NC | Zip Code 28570

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
33.00

**Transaction ID : a4db7d90-761a-40e0-a**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City Newport | State NC | Zip Code 28570

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
13.05

**Transaction ID : 8e7183b7-4e99-4231-8**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 46.05

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378758

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Theresa A Touchet

Mailing Address 102 French Street #3

City: New Orleans State: LA Zip Code: 70124

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 33.00

**Transaction ID : 00310e18-56a7-479f-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Theresa A Touchet

Mailing Address 102 French Street #3

City: New Orleans State: LA Zip Code: 70124

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 0.30

**Transaction ID : eb845166-a742-4527-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 33.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378759

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Earl Stewart

Mailing Address 9455 Snow Camp Road

City: Snowcamp State: NC Zip Code: 27349

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 90.00

**Transaction ID : c99770b0-264f-40d0-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Earl Stewart

Mailing Address 9455 Snow Camp Road

City: Snowcamp State: NC Zip Code: 27349

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 7.50

**Transaction ID : c6b5ab01-c92c-48d9-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 97.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378760

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte | State: LA | Zip Code: 70586

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 45.00

**Transaction ID : 59fb8790-0175-411f-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte | State: LA | Zip Code: 70586

Purpose of Expenditure: Mileage | Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 22.80

**Transaction ID : a95fbebf-06f6-4426-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 67.80

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kaleigh J Wagner

Mailing Address 18065 Wayne Rd

City: Odessa State: FL Zip Code: 33556

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 55.00

**Transaction ID : d2f35b17-3d96-4fff-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Randy M Gold

Mailing Address 1436 Haigs Creek Dr

City: Elgin State: SC Zip Code: 29045

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 55.00

**Transaction ID : 771d10ed-23f1-44ee-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 110.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378762

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Randy M Gold

Mailing Address 1436 Haigs Creek Dr

City: Elgin State: SC Zip Code: 29045

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 29.52

**Transaction ID : 63055aec-32e7-4733-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James W Blevins

Mailing Address 108 East Clinton St
PO Box 410

City: Salemburg State: NC Zip Code: 28385

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 40.00

**Transaction ID : 92afe3eb-0c46-4ac2-9**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 69.52

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James W Blevins

Date of Public Distribution/Dissemination
08 / 26 / 2014

Mailing Address
108 East Clinton St
PO Box 410

Amount
7.08

City: Salemburg State: NC Zip Code: 28385

**Transaction ID : 2919d3d0-cfaa-4533-a**

Purpose of Expenditure
Mileage

Category/Type 002

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lisa Booth

Date of Public Distribution/Dissemination
08 / 26 / 2014

Mailing Address
1434 South Avenue

Amount
90.00

City: Eden State: NC Zip Code: 27288

**Transaction ID : 5e104f1e-f6e2-42a1-9**

Purpose of Expenditure
Salary

Category/Type 001

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 97.08

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378764

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 11.40

**Transaction ID : e0af4115-e795-455e-9**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City: Raleigh State: NC Zip Code: 27610

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 30.00

**Transaction ID : a6a6dcb5-fc1b-4e8d-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 41.40

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378765

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City Raleigh | State NC | Zip Code 27610

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
4.50

**Transaction ID : baa7c318-a0ff-459b-8**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport | State LA | Zip Code 71104

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
30.00

**Transaction ID : 22dad2b7-b0b7-4c66-9**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 34.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
12.30

**Transaction ID : 3770feb9-c4fd-44e0-b**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Francesca Blom

Mailing Address 101 Asbury Ct

City Winchester State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
107.50

**Transaction ID : db275038-8a94-4dfa-8**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 119.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378767

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
40.00

**Transaction ID : 4599f6e3-a394-4429-8**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 554635.78

Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
20.10

**Transaction ID : 517558b0-df5b-4c14-9**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 554635.78

Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 60.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378768

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 45.00

**Transaction ID : 4ee65aaa-91c0-4e1f-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 14.40

**Transaction ID : e5023ca9-065f-46a6-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 59.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on MM / DD / YYYY

Full Name of Payee
Lindsey E Helms

Mailing Address 301 N Clinic Apt 3

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
25.00

**Transaction ID : 1f9c3ac0-d469-42e7-9**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lindsey E Helms

Mailing Address 301 N Clinic Apt 3

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
14.31

**Transaction ID : e62396df-297d-4787-b**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 39.31

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378770

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 20.00

**Transaction ID : e92dedf6-2ecf-4d02-9**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 5.10

**Transaction ID : a3785dd5-f367-4a5d-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 25.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Holly M Tippett

Mailing Address 595 Saint Gabrielle Dr

City: Florissant State: MO Zip Code: 63033

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 40.00

**Transaction ID : c23e2b90-223b-43cd-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Holly M Tippett

Mailing Address 595 Saint Gabrielle Dr

City: Florissant State: MO Zip Code: 63033

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 23.25

**Transaction ID : 109f055c-86a5-412c-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 63.25

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378772

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
50.00

**Transaction ID : e4957ff8-f2ce-4dde-b**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
1.20

**Transaction ID : 6e0e76bb-935d-44c3-a**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 51.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378773

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Benjamin Hernandez

Mailing Address 915 E Market Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
50.00

**Transaction ID : f8b8f00f-50b0-401a-8**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Benjamin Hernandez

Mailing Address 915 E Market Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
30.90

**Transaction ID : 67278d4f-8078-4b47-9**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 80.90

**(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.

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951378774

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 60.00

**Transaction ID : 60d2bc48-e600-4356-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 28.20

**Transaction ID : 0d713a9b-a345-483d-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 88.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378775

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 27.50

**Transaction ID : 2c6a0d57-3429-4562-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 15.00

**Transaction ID : 78cce586-554a-4475-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 42.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378776

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brittany Jones

Mailing Address 338 Wayne Drive

City Shreveport State LA Zip Code 71105

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
10.00

**Transaction ID : 706330da-9a63-4a41-9**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City New Orleans State LA Zip Code 70131

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
50.00

**Transaction ID : dad7bfcf-1277-4a2d-b**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 60.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378777

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 4.50

**Transaction ID : d194e6da-e3fe-4c2a-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 30.00

**Transaction ID : 1b4915d8-6bdc-4326-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 34.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 9.60

**Transaction ID : 04951ba6-7e3d-4568-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Elizabeth DeMaine

Mailing Address 75 Stephenson Ln

City: Sheridan State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 15.00

**Transaction ID : 80495500-d55d-47cd-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 24.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Elizabeth DeMaine

Mailing Address 75 Stephenson Ln

City: Sheridan State: AR Zip Code: 72143

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 19.80

**Transaction ID : 7cccc0e2-06ce-4202-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Amelia Brackett

Mailing Address 804 Roundabout Circle

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 40.00

**Transaction ID : 2290b937-6499-4bfb-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 59.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378780

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 80.00

**Transaction ID : 8047ef49-38ee-4095-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jazmine d Conner

Mailing Address 100 ASBURY CT

City: WINCHESTER State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 60.00

**Transaction ID : 13cc0169-9981-4ef0-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 140.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378781

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 70.00

**Transaction ID : e08922e2-12c0-4be0-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 80.00

**Transaction ID : b4d5984a-d622-40b1-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 150.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney D Culbreth

Mailing Address
100 Asbury CT
3200 Dam Neck Rd

City: Winchester
State: VA
Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 80.00

**Transaction ID : 30c8b055-efa0-4b8b-9**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rze Culbreath

Mailing Address
100 Asbury Ct

City: Winchester
State: VA
Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 80.00

**Transaction ID : 9e0bab58-4a2e-442b-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 160.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378783

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joneisha Stewart

Mailing Address 2329 Runnymede Dr

City: Marrero State: LA Zip Code: 70072

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 50.00

**Transaction ID : d4d258b0-da90-42fe-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carol L Walters

Mailing Address 1900 Glen West Way

City: Fort Smith State: AR Zip Code: 72916

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 50.00

**Transaction ID : 52936e44-53a2-4738-9**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 100.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378784

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carol L Walters

Mailing Address 1900 Glen West Way

City Fort Smith State AR Zip Code 72916

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
5.10

**Transaction ID : 6645eb89-1bf8-4fd8-b**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Thomas Dias

Mailing Address 110 Maryella Dr

City Searcy State AR Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
40.00

**Transaction ID : fe880fae-f19a-47a0-b**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 45.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378785

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 35.00

**Transaction ID : 48c11e6f-b578-41be-9**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kenny Wallis

Mailing Address 6412 Osage Dr

City: North Little rock State: AR Zip Code: 72116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 4.53

**Transaction ID : c90c0b49-a660-4532-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 39.53

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378786

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 90.00

**Transaction ID : 29a39a6c-b17f-4607-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 21.30

**Transaction ID : b30cbe98-8c46-48ff-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 111.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point | State: NC | Zip Code: 27260

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 70.00

**Transaction ID : e075014e-ccb2-455c-9**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point | State: NC | Zip Code: 27260

Purpose of Expenditure: Mileage | Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 20.40

**Transaction ID : 907ccdee-9e1a-491c-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 90.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
75.00

**Transaction ID : 1979870a-39ff-4a17-9**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
22.20

**Transaction ID : 84297e53-d56f-442c-a**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 97.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378789

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 35.50

**Transaction ID : e047ffae-c60d-4027-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 20.49

**Transaction ID : 1c60780a-1cf5-490d-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 55.99

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Stephanie L Heun

Mailing Address 8026 S Wilwood Dr Apt 101

City: Oak Creek State: WI Zip Code: 53154

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 10.00

**Transaction ID : 839363c5-c964-40dd-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shantal C Culbreath

Mailing Address 4691 Hercules Lane

City: Woodbridge State: VA Zip Code: 22193

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 80.00

**Transaction ID : 33ae81d5-66f3-47d9-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 90.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378791

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lesley Lennox

Mailing Address 2305 Cleary Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 20.00

**Transaction ID : a148326e-feb3-46df-a**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lesley Lennox

Mailing Address 2305 Cleary Ave

City: Metairie State: LA Zip Code: 70001

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 4.50

**Transaction ID : 934b702f-9310-40ea-8**

Date of Disbursement or Obligation: 08 / 23 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 24.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378792

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Sue G Walker

Mailing Address 3 Girard

City: Fort Smith State: AR Zip Code: 72901

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 50.00

**Transaction ID : 711373e9-f8cc-4182-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Sue G Walker

Mailing Address 3 Girard

City: Fort Smith State: AR Zip Code: 72901

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 8.40

**Transaction ID : ed23f209-7955-4ebf-a**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 58.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378793

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City Saltville State VA Zip Code 24370

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
70.00

**Transaction ID : 33ab495a-eb39-4c13-9**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City Saltville State VA Zip Code 24370

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 18 / 2014

Amount
31.50

**Transaction ID : f14d6cfc-8e54-4afb-a**

Date of Disbursement or Obligation
08 / 18 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 101.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378794

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 80.00

**Transaction ID : b44e5516-5a0e-4aca-b**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 19 / 2014

Amount: 32.70

**Transaction ID : 674aecd0-a865-45f6-a**

Date of Disbursement or Obligation: 08 / 19 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 112.70

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378795

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 70.00

Transaction ID : fec43e77-c346-4898-9

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 29.70

Transaction ID : a970ef75-f913-45c9-b

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 99.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378796

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 65.00

Transaction ID : 3876fb8b-2e16-4a4b-9

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 24.60

Transaction ID : 6cddd7d4-c3ff-4719-b

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378797

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Alex Peyton

Mailing Address 859 Hicks Rd

City: Washington State: LA Zip Code: 70589

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 50.00

**Transaction ID : 69ea757c-544b-4049-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mr. Alex Peyton

Mailing Address 859 Hicks Rd

City: Washington State: LA Zip Code: 70589

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 45.00

**Transaction ID : eb94a7f4-0830-4e90-a**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 95.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378798

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jodi Fountain

Mailing Address 1010 S Dogwood Drive

City: Bogalusa State: LA Zip Code: 70427

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 20.00

**Transaction ID : 5ca447d3-a70e-4851-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jodi Fountain

Mailing Address 1010 S Dogwood Drive

City: Bogalusa State: LA Zip Code: 70427

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 1.80

**Transaction ID : 2ed85000-b6df-4c7e-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 21.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378799

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gina Martin

Mailing Address 1115 Oakwood Dr

City: Belmont State: NC Zip Code: 28012

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 22.50

**Transaction ID : a707509d-637a-472d-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shannon E Downey

Mailing Address 112 Brookhollow Drive

City: Mount Holly State: NC Zip Code: 28120

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 22.50

**Transaction ID : 644ab0ed-133e-4a2d-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 45.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378800

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shannon E Downey

Mailing Address 112 Brookhollow Drive

City: Mount Holly State: NC Zip Code: 28120

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 10.80

**Transaction ID : de0a054d-d693-4016-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
William M Criswell

Mailing Address 115 Burns Mitchell Drive

City: Belmont State: NC Zip Code: 28012

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 22.50

**Transaction ID : 1b26f048-5fdb-4dd9-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 33.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378801

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 45.00

**Transaction ID : 8ec73be6-149f-4602-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 18.60

**Transaction ID : 0a0cae33-929f-4a13-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 63.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378802

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Sharon t Craig

Mailing Address 1410 Bushville Dr

City Lenoir | State NC | Zip Code 28645

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
30.00

**Transaction ID : 65ff22ec-9aa6-4ba9-9**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 1095959.94

Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

Full Name of Payee
Sharon t Craig

Mailing Address 1410 Bushville Dr

City Lenoir | State NC | Zip Code 28645

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
12.30

**Transaction ID : 62cc5c2b-4c9a-4a14-b**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 1095959.94

Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 42.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378803

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Dwayne C Smith

Mailing Address 900 Bramblegate Rd

City Hope Mills | State NC | Zip Code 28348

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
40.00

**Transaction ID : c931b398-b979-4ee9-b**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Dwayne C Smith

Mailing Address 900 Bramblegate Rd

City Hope Mills | State NC | Zip Code 28348

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
3.81

**Transaction ID : 5f6637f5-4b07-4037-8**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 43.81

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Kindstedt

Mailing Address 5510 Dogwood Dr

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 27.50

**Transaction ID : e36546f5-e627-4a31-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James Kindstedt

Mailing Address 5510 Dogwood Dr

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 8.37

**Transaction ID : eb1c7ffc-5c98-4b71-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 35.87

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378805

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joanna Kindstedt

Mailing Address 2134 Tobaccoville Rd

City: Rural Hall | State: NC | Zip Code: 27045

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 27.50

**Transaction ID : e23de83a-dd0c-4daf-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
William M Goldsmith

Mailing Address 211 Pearl St

City: Drexel | State: NC | Zip Code: 28619

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 70.00

**Transaction ID : 9ded5874-87fc-4644-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 97.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378806

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
William M Goldsmith

Mailing Address 211 Pearl St

City: Drexel State: NC Zip Code: 28619

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 13.92

**Transaction ID : 67cb92ad-f32d-4fad-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
William M Goldsmith

Mailing Address 211 Pearl St

City: Drexel State: NC Zip Code: 28619

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 70.00

**Transaction ID : 71d1bb28-34f0-41bb-a**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 83.92

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378807

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
William M Goldsmith

Mailing Address 211 Pearl St

City: Drexel State: NC Zip Code: 28619

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 13.92

**Transaction ID : e9662017-c107-4446-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Regina R Mouton

Mailing Address 5827 Brighton Pl

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 100.00

**Transaction ID : b385c82c-d9c7-47e4-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 113.92

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378808

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Regina R Mouton

Mailing Address 5827 Brighton Pl

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 45.00

**Transaction ID : 3f8cd5f9-944e-4018-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Casey Stockton

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 40.00

**Transaction ID : 0da5c03d-f771-4020-a**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 85.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378809

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Casey Stockton

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 12.30

**Transaction ID : c96bd36d-6b57-4863-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mary Johnson

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 40.00

**Transaction ID : 1e9111fa-0957-43ec-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 52.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378810

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 50.00

**Transaction ID : c234c43b-a874-4b5e-a**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 17.70

**Transaction ID : 33dd55c2-cbb6-45d2-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 67.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378811

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 50.00

**Transaction ID : df5e1fd4-acb7-4ea0-a**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 17.70

**Transaction ID : 7872d86b-47bb-4179-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 67.70

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378812

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 50.00

**Transaction ID : 3a108166-b638-4509-a**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 17.70

**Transaction ID : 0f37cc47-2a4e-4b0a-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 67.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378813

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 50.00

**Transaction ID : 10e8090a-d568-4642-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 17.70

**Transaction ID : d43c9ce0-9f6f-4494-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 67.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378814

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City Spindale State NC Zip Code 28160

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
80.00

**Transaction ID : 93611f32-fec6-48e8-b**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City Spindale State NC Zip Code 28160

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
27.00

**Transaction ID : a9dd96ac-34cf-41c5-a**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 107.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amanda Boley

Mailing Address Split Oak Drive

City charlotte State NC Zip Code 28227

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
52.50

**Transaction ID : 9f031e4e-e87a-484d-8**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Amanda Boley

Mailing Address Split Oak Drive

City charlotte State NC Zip Code 28227

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
24.72

**Transaction ID : 526c202f-ef9b-4962-8**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 77.22

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378816

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Miller

Mailing Address 718 Azalea Dr.
Unit 453

City: Hampstead State: NC Zip Code: 28443

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 52.10

**Transaction ID : a869f2f7-762a-4a4f-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lisa Miller

Mailing Address 718 Azalea Dr.
Unit 453

City: Hampstead State: NC Zip Code: 28443

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 4.89

**Transaction ID : b119d983-015e-4c49-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 56.99

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378817

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Aaron L Griffin

Mailing Address 4830 Westin Park Drive

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 40.00

**Transaction ID : 04a82ff4-ad18-453c-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Aaron L Griffin

Mailing Address 4830 Westin Park Drive

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 2.70

**Transaction ID : f12e6f22-e48c-4018-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 42.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City Search | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
40.00

**Transaction ID : be824fc3-a920-4322-b**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City Search | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
23.10

**Transaction ID : ee443d36-b08b-4470-a**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 63.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378819

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tymber D Crawley

Mailing Address 6 Sherwood Dr

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 40.00

**Transaction ID : fe47333f-a900-4866-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tymber D Crawley

Mailing Address 6 Sherwood Dr

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 2.70

**Transaction ID : 6a32e2d9-b0e3-4bcd-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 42.70

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378820

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joneisha Stewart

Mailing Address 2329 Runnymede Dr

City: Marrero State: LA Zip Code: 70072

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 40.00

**Transaction ID : c6641087-e7df-4c0d-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eric Wilson

Mailing Address 907 Randall Drive

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 30.00

**Transaction ID : 1e811325-47b4-434e-a**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 70.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378821

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eric Wilson

Mailing Address 907 Randall Drive

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 15.00

**Transaction ID : 4b5b9863-a57a-4408-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City: Newport State: NC Zip Code: 28570

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 23.00

**Transaction ID : 4c738ac2-bc64-4830-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 38.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378822

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Steven Best

Mailing Address 103 Washington Ave

City Newport | State NC | Zip Code 28570

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
9.93

**Transaction ID : 7d46369d-7b6e-4ac3-b**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport | State LA | Zip Code 71104

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
80.00

**Transaction ID : 854e3198-4a2e-4e52-a**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.93

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378823

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City: Shreveport State: LA Zip Code: 71104

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 51.60

**Transaction ID : a93bddd9-c87c-4161-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City: Shreveport State: LA Zip Code: 71119

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 80.00

**Transaction ID : 26f83f07-fab1-49f0-a**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 131.60

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378824

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport | State LA | Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
51.00

**Transaction ID : 173d178a-38dc-47cb-8**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carol L Walters

Mailing Address 1900 Glen West Way

City Fort Smith | State AR | Zip Code 72916

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
30.00

**Transaction ID : 22adfcb7-11fa-4f56-b**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 81.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378825

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carol L Walters

Mailing Address 1900 Glen West Way

City: Fort Smith State: AR Zip Code: 72916

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 10.80

**Transaction ID : 1056dcff-c102-41e4-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Sue G Walker

Mailing Address 3 Girard

City: Fort Smith State: AR Zip Code: 72901

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 35.00

**Transaction ID : 58942d96-5c7e-4e96-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 45.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378826

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lucas H Hoyle

Mailing Address 282 Falls Ave

City: Granite Falls State: NC Zip Code: 28630

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 30.00

**Transaction ID : 97e220d9-494a-4286-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lucas H Hoyle

Mailing Address 282 Falls Ave

City: Granite Falls State: NC Zip Code: 28630

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 17.10

**Transaction ID : b25d4c2d-5d6b-4af6-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 47.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378827

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mattie Harris

Mailing Address 3654 Tara St

City springdale State AR Zip Code 72762

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
25.00

**Transaction ID : 1cc29880-2ae1-4c60-b**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mattie Harris

Mailing Address 3654 Tara St

City springdale State AR Zip Code 72762

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
10.80

**Transaction ID : 702ec371-0f53-4cbf-8**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 35.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Misty A Ledford

Mailing Address 44 Bell St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 50.00

**Transaction ID : b2f1e0d3-a561-4950-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Misty A Ledford

Mailing Address 44 Bell St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 17.70

**Transaction ID : 36e8d4c8-1e7a-400e-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 67.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Laura U Logie

Mailing Address 2565 Shire Circle

City Harrisonburg State VA Zip Code 22801

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
30.00

**Transaction ID : ce438fda-3cac-44ba-a**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Brandon Wheeler

Mailing Address 10112 Piney Creek Ct

City Charolette State NC Zip Code 28215

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
30.00

**Transaction ID : 01f19bee-06b9-4879-a**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 60.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378830

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brandon Wheeler

Mailing Address 10112 Piney Creek Ct

City: Charolette State: NC Zip Code: 28215

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 19.50

**Transaction ID : 524a7354-ea6d-4455-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City: Wilmington State: NC Zip Code: 28405

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 35.00

**Transaction ID : 4b16a239-3c5d-417b-a**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 54.50

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378831

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City Wilmington State NC Zip Code 28405

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
20.40

**Transaction ID : 4b7e543d-796b-4906-8**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City Shelby State NC Zip Code 28152

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
40.00

**Transaction ID : 3dfc0ca6-023e-4728-a**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 60.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378832

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City: Shelby State: NC Zip Code: 28152

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 26.10

**Transaction ID : 9364bb10-3662-477c-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lisa A Hackett

Mailing Address 137 S Palm ST

City: Winnabow State: NC Zip Code: 28479

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 52.50

**Transaction ID : 0ecd9384-d30f-46d0-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 78.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378833

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa A Hackett

Mailing Address 137 S Palm ST

City Winnabow State NC Zip Code 28479

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
4.80

**Transaction ID : 80081f17-a6b2-4df4-b**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Jacob S Mann

Mailing Address 3875 Old Stage Rd S

City Erwin State NC Zip Code 28339

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
30.00

**Transaction ID : 7a9e71df-8596-467a-8**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 34.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378834

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jacob S Mann

Mailing Address 3875 Old Stage Rd S

City: Erwin State: NC Zip Code: 28339

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 34.50

**Transaction ID : 4c004e07-7cca-4306-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jacob L Colbert

Mailing Address 49 Sharon Circle

City: Greenbrier State: AR Zip Code: 72058

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 20.00

**Transaction ID : ee59bb83-49d9-4bf8-a**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 54.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378835

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jacob L Colbert

Mailing Address 49 Sharon Circle

City Greenbrier State AR Zip Code 72058

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
15.00

**Transaction ID : 961e2c53-b0a3-40ec-8**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Caleb Craig

Mailing Address 1410 Bushville drive

City Lenoir State NC Zip Code 28645

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
80.00

**Transaction ID : 28e5d69d-70af-472d-b**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 95.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378836

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Caleb Craig

Mailing Address 1410 Bushville drive

City Lenoir | State NC | Zip Code 28645

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
20.10

**Transaction ID : f6b5ef38-cd7d-40c1-9**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City Metaire | State LA | Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
10.00

**Transaction ID : 1b477899-86ad-419c-a**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 30.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378837

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 0.60

**Transaction ID : 797506a1-0eec-40cd-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francesca Blom

Mailing Address 101 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 100.00

**Transaction ID : e6ea87ed-829f-4b4c-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 100.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378838

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City Ville Platte | State LA | Zip Code 70586

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
50.00

**Transaction ID : 96450554-7f9e-41ef-a**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City Ville Platte | State LA | Zip Code 70586

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
24.90

**Transaction ID : cd638179-0e7f-4b68-a**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 74.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378839

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Peggy A Sides

Mailing Address 2183 Spokane Rd

City: Fayetteville State: NC Zip Code: 28304

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 80.00

**Transaction ID : 1d0d85f5-ddd5-4078-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Peggy A Sides

Mailing Address 2183 Spokane Rd

City: Fayetteville State: NC Zip Code: 28304

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 9.00

**Transaction ID : de2617d9-7c1b-43ff-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 89.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378840

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brenda L Dawson

Mailing Address 6021 General Samuel Rd

City: Jacksonville State: AR Zip Code: 72076

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 17.00

**Transaction ID : b16bc345-8da3-4df5-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brenda L Dawson

Mailing Address 6021 General Samuel Rd

City: Jacksonville State: AR Zip Code: 72076

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 4.80

**Transaction ID : b6e5a6be-abd1-4933-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 21.80

**(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.

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951378841

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 25.00

**Transaction ID : 7f3ee993-99d4-462f-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 1.80

**Transaction ID : c6efe9ac-1ade-4d44-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 26.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378842

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Adam Rock

Mailing Address 307 Farris Rd Apt 1

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 20.00

**Transaction ID : 44a279b3-4fca-43f3-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Adam Rock

Mailing Address 307 Farris Rd Apt 1

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 3.00

**Transaction ID : 096448fd-cddc-44ba-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 23.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378843

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City Raleigh | State NC | Zip Code 27610

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
31.50

**Transaction ID : 32a40891-32a4-40b3-a**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City Raleigh | State NC | Zip Code 27610

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
9.00

**Transaction ID : 5e267125-ab5a-488d-9**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 40.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378844

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 65.00

**Transaction ID : ac0ee4dd-e180-4301-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 17.10

**Transaction ID : e5c5240e-7732-466b-a**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 82.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378845

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Barbara A Williams

Mailing Address
3002 Darden Rd
Apt A

City: Greensboro
State: NC
Zip Code: 27407

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 115.00

**Transaction ID : 775e68be-c91f-47cb-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nathan D Wirebaugh

Mailing Address
7320 Red Maple Dr

City: Holland
State: OH
Zip Code: 43528

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 32.50

**Transaction ID : 83d7df0b-4449-446a-a**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 147.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378846

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 90.00

**Transaction ID : 230b83bf-d12a-4ecd-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 22.80

**Transaction ID : 62f3db49-62fa-4804-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 112.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378847

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Vonniqua Jackson

Mailing Address
111 Westchester Blvd
Apt D4

City: Slidell
State: LA
Zip Code: 70458

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 21.00

**Transaction ID : 77d131d4-45ad-481e-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Patrice Wolfe

Mailing Address
9909 Treasure Hill Rd

City: Little Rock
State: AR
Zip Code: 72205

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 32.50

**Transaction ID : 1dfada52-f420-4869-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 53.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378848

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 13.50

**Transaction ID : 78406c1a-fe82-421b-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Earl Stewart

Mailing Address 9455 Snow Camp Road

City: Snowcamp State: NC Zip Code: 27349

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 60.00

**Transaction ID : d860ce7d-28eb-4588-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 73.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378849

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Earl Stewart

Mailing Address 9455 Snow Camp Road

City: Snowcamp State: NC Zip Code: 27349

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 12.60

**Transaction ID : ac172d9d-61a2-47d2-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Randy M Gold

Mailing Address 1436 Haigs Creek Dr

City: Elgin State: SC Zip Code: 29045

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 50.00

**Transaction ID : 6827b30d-cf88-4edc-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 62.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378850

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Randy M Gold

Mailing Address 1436 Haigs Creek Dr

City: Elgin State: SC Zip Code: 29045

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 37.02

**Transaction ID : 2870161b-603f-4259-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kaleigh J Wagner

Mailing Address 18065 Wayne Rd

City: Odessa State: FL Zip Code: 33556

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 50.00

**Transaction ID : db0183fe-c16d-474f-a**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 87.02

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378851

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 50.00

**Transaction ID : ee65c315-4d16-46a4-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 27.90

**Transaction ID : 5e1acd10-0065-4858-a**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 77.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Taylor N Randall

Mailing Address
2002 E Park Ave
Apt 40

City: Searcy
State: AR
Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 35.00

**Transaction ID : ac32c397-435f-43be-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Petrina Williams

Mailing Address
3007 Darden Rd

City: Greensboro
State: NC
Zip Code: 27407

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 115.00

**Transaction ID : 979cab18-58e3-4087-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 150.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Petrina Williams

Mailing Address 3007 Darden Rd

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
34.80

**Transaction ID : 4ed633c5-5cb9-474b-b**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Stephanie L Heun

Mailing Address 8026 S Wilwood Dr Apt 101

City Oak Creek State WI Zip Code 53154

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
25.00

**Transaction ID : d3eb2db0-0342-42a5-b**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 59.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378854

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shantal C Culbreath

Mailing Address 4691 Hercules Lane

City Woodbridge State VA Zip Code 22193

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
70.00

**Transaction ID : c5a36520-7f8e-4078-b**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shelbi L Randall

Mailing Address 202 East Park Ave Apt 40

City Searcy State AR Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
35.00

**Transaction ID : 5a7888c8-29b6-47c0-b**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 105.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shelbi L Randall

Mailing Address 202 East Park Ave Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 21.60

**Transaction ID : 5d90845c-b155-4fd9-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 60.00

**Transaction ID : 4bbafbe2-c2a2-44c7-a**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 81.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378856

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 13.50

**Transaction ID : 3f1735c8-6b72-4845-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Marysol Netro

Mailing Address 312 S Gunter St

City: Siloam Springs State: AR Zip Code: 72761

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 50.00

**Transaction ID : ce2a5796-e2f2-4f7d-a**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 63.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Marysol Netro

Mailing Address 312 S Gunter St

City: Siloam Springs State: AR Zip Code: 72761

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 7.50

**Transaction ID : b618238f-c8d1-4ae3-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City: METAIRIE State: LA Zip Code: 70003

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 40.00

**Transaction ID : 066b0a6d-6e0b-4263-a**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 47.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
1.20

**Transaction ID : daf5867f-f1c6-44b1-b**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brenda L McCune

Mailing Address 1254 Fleming St Apt 6

City Conway State AR Zip Code 72032

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
25.00

**Transaction ID : 4edc91a8-80e1-4a0b-a**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 26.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brenda L McCune

Mailing Address 1254 Fleming St Apt 6

City: Conway State: AR Zip Code: 72032

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 6.00

**Transaction ID : f270b4f1-b9f9-45e8-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 110.00

**Transaction ID : 9c58ff65-ad37-410a-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 116.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 23.10

**Transaction ID : 3d471a6e-456d-4f54-a**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 95.00

**Transaction ID : fbf9b721-6c77-46ff-9**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 118.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
22.50

**Transaction ID : 92b32ace-cf19-40ae-a**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City Winchester State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
60.00

**Transaction ID : 3976a93e-bbda-4b9b-8**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 82.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jazmine d Conner

Mailing Address 100 ASBURY CT

City WINCHESTER State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
60.00

**Transaction ID : 9799c038-9e76-48d2-a**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City High Point State NC Zip Code 27260

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
105.00

**Transaction ID : 72032438-df45-4784-a**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 165.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378863

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point | State: NC | Zip Code: 27260

Purpose of Expenditure: Mileage | Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 21.30

**Transaction ID : 01f30cf3-6430-41c8-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City: Winchester | State: VA | Zip Code: 22602

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 60.00

**Transaction ID : a3ebf0c5-38f5-4786-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 81.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378864

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City Winchester State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
60.00

**Transaction ID : 63424f93-51f2-4c60-8**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rodney D Culbreth

Mailing Address 100 Asbury CT
3200 Dam Neck Rd

City Winchester State VA Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
60.00

**Transaction ID : cc6a2d67-12eb-4746-8**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 120.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rze Culbreath

Mailing Address 100 Asbury Ct

City Winchester | State VA | Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
60.00

**Transaction ID : 6735ebd4-61e1-44fe-8**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Theresa a Youngblood

Mailing Address 102 S Main Street Apt A2

City Berryville | State VA | Zip Code 22611

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
90.00

**Transaction ID : 29a25588-0f96-4483-8**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 150.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378866

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 60.00

**Transaction ID : 0e2c5b51-77e1-48e4-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 10.50

**Transaction ID : 6e9f41d8-22d7-4a2c-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 70.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378867

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
38.30

**Transaction ID : c48f22f4-dd14-4676-b**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
26.04

**Transaction ID : a3828358-7045-4d29-b**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 64.34

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378868

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jacob T Craig

Mailing Address 1410 Bushville Dr

City Lenoir | State NC | Zip Code 28645

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
70.00

**Transaction ID : 32ed0cb0-fa2c-4109-a**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Jacob T Craig

Mailing Address 1410 Bushville Dr

City Lenoir | State NC | Zip Code 28645

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 27 / 2014

Amount
15.00

**Transaction ID : 938c1439-22ea-497c-9**

Date of Disbursement or Obligation
08 / 27 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 85.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378869

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 50.00

**Transaction ID : 4b195324-3572-4914-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 9.00

**Transaction ID : 14241617-8311-4da8-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 59.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378870

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Cory Bryson

Mailing Address 216 Dogwood Ln

City Belmont | State NC | Zip Code 28012

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
55.00

**Transaction ID : 5f516e16-0f69-49f1-b**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Cory Bryson

Mailing Address 216 Dogwood Ln

City Belmont | State NC | Zip Code 28012

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
21.00

**Transaction ID : 19c7fd42-bd58-44d1-8**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 76.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 65.00

**Transaction ID : 0fa368b2-c5ca-4539-8**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 24.75

**Transaction ID : e4537f35-23f3-42a4-b**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.75

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 65.00

**Transaction ID : b3916230-eb01-413c-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 24.69

**Transaction ID : 7e7fc0a1-01f3-4c29-8**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.69

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378873

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jessica Habakjian

Mailing Address 4193 W. Lang St

City: Farmville State: NC Zip Code: 27828

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 60.00

**Transaction ID : 244c2ff8-b5a9-47a9-a**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Jessica Habakjian

Mailing Address 4193 W. Lang St

City: Farmville State: NC Zip Code: 27828

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 9.60

**Transaction ID : 0f41c8ae-e32f-41da-9**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 69.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378874

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Thomas Dias

Mailing Address 110 Maryella Dr

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
50.00

**Transaction ID : 38db297d-b32c-4ca6-8**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Thomas Dias

Mailing Address 110 Maryella Dr

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
29.10

**Transaction ID : 6443ac87-130b-4e9c-8**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 79.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Matt Curran

Mailing Address 1537 Country Lane

City: Kernersville State: NC Zip Code: 27284

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 30.00

**Transaction ID : 1b7e88c5-c538-424d-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Matt Curran

Mailing Address 1537 Country Lane

City: Kernersville State: NC Zip Code: 27284

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 12.03

**Transaction ID : 39c8a6df-6613-40ef-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 42.03

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378876

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eric J Smith

Mailing Address 4967 Dysartville

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 80.00

**Transaction ID : 013e6c48-1179-4f96-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 80.00

**Transaction ID : de583caa-b126-4e29-8**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 160.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378877

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 8.40

**Transaction ID : 9b8068b5-9b24-438c-9**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 15.00

**Transaction ID : ac17b8e2-beb1-4f67-9**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 23.40

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378878

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Donald Dessauer

Mailing Address 1804 Auburn Ave

City: Metaire State: LA Zip Code: 70003

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 0.60

**Transaction ID : a01d95ee-b3a2-4b66-9**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
William M Goldsmith

Mailing Address 211 Pearl St

City: Drexel State: NC Zip Code: 28619

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 72.50

**Transaction ID : b159c043-a0a7-4888-9**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 73.10

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378879

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
William M Goldsmith

Mailing Address 211 Pearl St

City: Drexel State: NC Zip Code: 28619

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 15.54

**Transaction ID : 063f796c-a9fb-4ad1-9**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jodi Fountain

Mailing Address 1010 S Dogwood Drive

City: Bogalusa State: LA Zip Code: 70427

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 20.00

**Transaction ID : 162576bc-9341-4a57-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 35.54

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378880

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jodi Fountain

Mailing Address 1010 S Dogwood Drive

City: Bogalusa State: LA Zip Code: 70427

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 10.80

**Transaction ID : 9194f373-d99f-4ba2-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 35.00

**Transaction ID : fcb75ff0-b2b2-4cc4-b**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 45.80

**(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378881

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lorri Anderson

Mailing Address 7214 Duchamp Dr

City: Charlotte State: NC Zip Code: 23215

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 10.20

**Transaction ID : 8b297898-8a1e-4fde-9**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Sharon t Craig

Mailing Address 1410 Bushville Dr

City: Lenoir State: NC Zip Code: 28645

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 30.00

**Transaction ID : 62f0f218-48b0-4589-9**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 40.20

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378882

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Sharon t Craig

Mailing Address 1410 Bushville Dr

City Lenoir | State NC | Zip Code 28645

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
12.00

**Transaction ID : 60c518e5-a6b2-4ff8-8**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro | State NC | Zip Code 27410

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
50.00

**Transaction ID : fa614376-7178-492f-9**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 62.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378883

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
19.80

**Transaction ID : e21ee701-8e8a-4701-8**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Elizabeth M Moore

Mailing Address 1223 Silver Sage Dr Apt 303

City Raleigh State NC Zip Code 27606

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
13.00

**Transaction ID : e759c3f7-6665-4b13-8**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 32.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378884

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Elizabeth M Moore

Mailing Address 1223 Silver Sage Dr Apt 303

City: Raleigh State: NC Zip Code: 27606

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 2.91

**Transaction ID : befd1a6c-e187-49d9-9**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Sue G Walker

Mailing Address 3 Girard

City: Fort Smith State: AR Zip Code: 72901

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 65.00

**Transaction ID : b93d84cd-1838-43da-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 67.91

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378885

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Sue G Walker

Mailing Address 3 Girard

City: Fort Smith State: AR Zip Code: 72901

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 16.80

**Transaction ID : 6ff3096d-d9fd-4fb1-b**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carol L Walters

Mailing Address 1900 Glen West Way

City: Fort Smith State: AR Zip Code: 72916

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 65.00

**Transaction ID : 9c793a17-e0e9-4bd3-9**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 81.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carol L Walters

Mailing Address 1900 Glen West Way

City: Fort Smith State: AR Zip Code: 72916

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 1.80

**Transaction ID : 6f5a1465-66ea-41a5-b**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Warren Gravois

Mailing Address 16005 7th St

City: Pearlington State: MS Zip Code: 39572

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 37.50

**Transaction ID : 17a11153-c83d-45a4-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 39.30

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378887

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Warren Gravois

Mailing Address 16005 7th St

City: Pearlington State: MS Zip Code: 39572

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 1.20

**Transaction ID : f81c41a1-c9ad-4581-b**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Stephanie L Heun

Mailing Address 8026 S Wilwood Dr Apt 101

City: Oak Creek State: WI Zip Code: 53154

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 30.00

**Transaction ID : 5ade2935-fb9d-4633-b**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 31.20

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378888

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Katlyn P Bernardini

Mailing Address 1326 East Field St

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 10.00

**Transaction ID : dc0aa5b0-8617-47a7-8**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Katlyn P Bernardini

Mailing Address 1326 East Field St

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 3.30

**Transaction ID : 80e3d5d0-bb2f-455a-b**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 13.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378889

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Caleb Craig

Mailing Address 1410 Bushville drive

City Lenoir | State NC | Zip Code 28645

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
100.00

**Transaction ID : 086db3e3-3da5-44bc-b**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Caleb Craig

Mailing Address 1410 Bushville drive

City Lenoir | State NC | Zip Code 28645

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
21.60

**Transaction ID : f8a3c50c-e2fd-409c-b**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 121.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378890

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 40.00

**Transaction ID : 16ca578d-1f43-497d-8**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 12.30

**Transaction ID : da953a17-f868-4117-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 52.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378891

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mattie Harris

Mailing Address 3654 Tara St

City springdale State AR Zip Code 72762

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
62.50

**Transaction ID : 2f6d2e27-70a9-4e15-a**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mattie Harris

Mailing Address 3654 Tara St

City springdale State AR Zip Code 72762

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
20.10

**Transaction ID : 259daff8-7e59-47cf-8**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 82.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378892

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Beau Autin

Mailing Address 345 Auroura Ave

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 60.00

**Transaction ID : f94d20f5-bb32-4bb0-9**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Beau Autin

Mailing Address 345 Auroura Ave

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 4.59

**Transaction ID : 7239d578-a33d-4286-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 64.59

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378893

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jacob T Craig

Mailing Address 1410 Bushville Dr

City: Lenoir State: NC Zip Code: 28645

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 63.00

**Transaction ID : e86cbec8-0a1f-40f7-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jacob T Craig

Mailing Address 1410 Bushville Dr

City: Lenoir State: NC Zip Code: 28645

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 8.40

**Transaction ID : 41f060bf-9a62-41d5-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 71.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378894

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amanda Boley

Mailing Address
Split Oak Drive

City: charlotte State: NC Zip Code: 28227

Purpose of Expenditure
Salary

Category/Type: 001

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
52.50

**Transaction ID : c6b27096-f1d9-40cf-b**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Amanda Boley

Mailing Address
Split Oak Drive

City: charlotte State: NC Zip Code: 28227

Purpose of Expenditure
Mileage

Category/Type: 002

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
22.80

**Transaction ID : 7ecb77b6-8d87-409d-9**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 75.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378895

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 100.00

**Transaction ID : 99b4d543-95f2-424e-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lisa Booth

Mailing Address 1434 South Avenue

City: Eden State: NC Zip Code: 27288

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 10.50

**Transaction ID : b9957130-1098-4b7d-9**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 110.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378896

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Benjamin Hernandez

Mailing Address 915 E Market Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
67.50

**Transaction ID : e5acfd5b-eb4c-4c7b-9**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Benjamin Hernandez

Mailing Address 915 E Market Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
50.10

**Transaction ID : efe0ec60-e1ff-416b-9**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 117.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 50.00

**Transaction ID : aae08fae-ccb1-4490-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Virginia M Stevens

Mailing Address 1691 Fork Mtn Rd

City: Bakersville State: NC Zip Code: 28705

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 25.80

**Transaction ID : 93779cbc-446c-472f-b**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 75.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378898

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 50.00

**Transaction ID : e170abfd-bf3a-47d1-9**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Malinda Ledford

Mailing Address 44 Bell Street Ext

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 25.80

**Transaction ID : 6a5b6496-e07e-46cc-9**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 75.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378899

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Misty A Ledford

Mailing Address 44 Bell St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 50.00

**Transaction ID : 49cbc7e3-3bd7-4a34-8**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Misty A Ledford

Mailing Address 44 Bell St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 25.80

**Transaction ID : a13f7e2e-c90a-4079-8**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 75.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378900

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Theresa A Touchet

Mailing Address 102 French Street #3

City: New Orleans State: LA Zip Code: 70124

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 3.00

**Transaction ID : 3f50f7fc-df0f-462e-b**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Theresa A Touchet

Mailing Address 102 French Street #3

City: New Orleans State: LA Zip Code: 70124

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 0.03

**Transaction ID : 261ccf31-fdcf-4cb4-8**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 3.03

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378901

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Barbara E Spritz

Mailing Address 3346 Durham St Ext

City: Burlington State: NC Zip Code: 27217

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 35.00

**Transaction ID : 8f3dbd12-c1e7-4136-8**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Barbara E Spritz

Mailing Address 3346 Durham St Ext

City: Burlington State: NC Zip Code: 27217

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 4.80

**Transaction ID : 698866bf-09c4-4b42-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 39.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378902

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 28.70

**Transaction ID : 25b5ed19-74f0-45af-b**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City: Searcy State: AR Zip Code: 72149

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 19.98

**Transaction ID : dc061594-475e-4865-b**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 48.68

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378903

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lourdes Lopez

Mailing Address 2936 Brushwood Ave

City Springdale State AR Zip Code 72764

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
40.00

**Transaction ID : ca8911e3-e458-4220-8**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lourdes Lopez

Mailing Address 2936 Brushwood Ave

City Springdale State AR Zip Code 72764

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
4.50

**Transaction ID : dcafac36-4b96-4a7d-a**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 44.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kaleigh J Wagner

Mailing Address 18065 Wayne Rd

City: Odessa State: FL Zip Code: 33556

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 45.00

**Transaction ID : ac483d37-683d-4799-b**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Randy M Gold

Mailing Address 1436 Haigs Creek Dr

City: Elgin State: SC Zip Code: 29045

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 45.00

**Transaction ID : 69f951f8-fb38-4260-b**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 90.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378905

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Randy M Gold

Mailing Address 1436 Haigs Creek Dr

City: Elgin State: SC Zip Code: 29045

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 27.69

**Transaction ID : 841ad0c5-6842-4f23-9**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City: Spindale State: NC Zip Code: 28160

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 87.50

**Transaction ID : 402f8239-1a7d-49ea-8**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 115.19

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378906

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City Spindale | State NC | Zip Code 28160

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
33.48

**Transaction ID : e52e3f80-72a3-4a29-8**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joneisha Stewart

Mailing Address 2329 Runnymede Dr

City Marrero | State LA | Zip Code 70072

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
40.00

**Transaction ID : 376b2bca-0e49-46e8-b**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 73.48

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nathan D Wirebaugh

Mailing Address 7320 Red Maple Dr

City: Holland State: OH Zip Code: 43528

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 25.00

**Transaction ID : 97e9fe86-584e-4d01-9**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 55.00

**Transaction ID : be5bae3a-b817-44cc-b**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 80.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378908

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 26.70

**Transaction ID : 953cea45-2371-4dd4-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City: Sterling State: VA Zip Code: 20165

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 60.00

**Transaction ID : 5c198083-afd2-4a6c-9**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 86.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378909

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 15.00

**Transaction ID : bc7c9ed6-ac9a-4e71-b**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City: Raleigh State: NC Zip Code: 27604

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 5.10

**Transaction ID : 46cefb02-83c8-4c5e-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 20.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378910

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 65.00

**Transaction ID : 08b35081-6629-4b7f-9**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 31.29

**Transaction ID : c0f6096c-7139-479c-b**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 96.29

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378911

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jessica Habakjian

Mailing Address 4193 W. Lang St

City: Farmville State: NC Zip Code: 27828

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 80.00

**Transaction ID : 261938bc-e909-4a9e-8**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jessica Habakjian

Mailing Address 4193 W. Lang St

City: Farmville State: NC Zip Code: 27828

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 10.20

**Transaction ID : b272052d-942f-485b-b**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 90.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378912

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James W Blevins

Date of Public Distribution/Dissemination
08 / 28 / 2014

Mailing Address
108 East Clinton St
PO Box 410

Amount
27.50

City: Salemburg State: NC Zip Code: 28385

**Transaction ID : 4dd6579e-cd43-4bed-8**

Purpose of Expenditure
Salary

Category/Type 001

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
James W Blevins

Date of Public Distribution/Dissemination
08 / 28 / 2014

Mailing Address
108 East Clinton St
PO Box 410

Amount
9.60

City: Salemburg State: NC Zip Code: 28385

**Transaction ID : ba054255-eb99-4883-9**

Purpose of Expenditure
Mileage

Category/Type 002

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 37.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378913

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 30.00

**Transaction ID : 7270c7b2-50a6-467b-9**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Patrice Wolfe

Mailing Address 9909 Treasure Hill Rd

City: Little Rock State: AR Zip Code: 72205

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 15.00

**Transaction ID : 0e29ca95-2374-499a-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 45.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378914

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 65.00

**Transaction ID : 0c1033f4-ea58-48b7-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 31.26

**Transaction ID : 1afa7aca-4e3c-42b8-8**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 96.26

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378915

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
40.00

**Transaction ID : da1fd493-cac1-48ba-b**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
24.00

**Transaction ID : 981d435d-be61-4414-a**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 64.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378916

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City: Shreveport State: LA Zip Code: 71104

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 40.00

**Transaction ID : 4d7866c5-02ab-4714-b**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City: Shreveport State: LA Zip Code: 71104

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 24.00

**Transaction ID : 51635241-8a77-405c-b**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 64.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378917

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 25.00

**Transaction ID : fd08ba9d-e640-45bb-8**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 1.83

**Transaction ID : 289bd49d-8a71-4501-8**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 26.83

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378918

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shantal C Culbreath

Mailing Address 4691 Hercules Lane

City Woodbridge State VA Zip Code 22193

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
80.00

**Transaction ID : 7991c6ea-e4b9-45dc-a**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City Ville Platte State LA Zip Code 70586

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
50.00

**Transaction ID : a3b189cc-d8a0-4dc8-b**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 130.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378919

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Vidrine

Mailing Address 1103 West Wilson Street

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 27.60

**Transaction ID : 0c3317cc-bc71-4132-9**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shelbi L Randall

Mailing Address 202 East Park Ave Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 35.00

**Transaction ID : 871fb524-1e6f-4235-8**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 62.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378920

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shelbi L Randall

Mailing Address 202 East Park Ave Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 35.00

Transaction ID : f74aa01e-b6f2-4169-8

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francesca Blom

Mailing Address 101 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 102.50

Transaction ID : 05b94607-8d27-4564-8

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 137.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378921

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Taylor N Randall

Mailing Address
2002 E Park Ave
Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 35.00

**Transaction ID : 3a40ba76-6e4b-4a02-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Taylor N Randall

Mailing Address
2002 E Park Ave
Apt 40

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 28.26

**Transaction ID : 2c632827-ac2e-4969-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 63.26

**(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.

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951378922

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Patricia G Tiziani

Mailing Address 221 Williamsburg Dr

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 10.00

**Transaction ID : caec355e-2edc-4eff-9**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Patricia G Tiziani

Mailing Address 221 Williamsburg Dr

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 3.90

**Transaction ID : 44e38741-5c03-4766-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 13.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Peter D Tiziani

Mailing Address 221 Williamsburg Dr

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 10.00

**Transaction ID : 2d6ee04e-6f5f-4ec7-b**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carla A Wells

Mailing Address 2013 Woodwind Way

City: Van Buren State: NC Zip Code: 72956

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 10.00

**Transaction ID : 6fddfc2a-0d76-4b85-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 20.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378924

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carla A Wells

Mailing Address 2013 Woodwind Way

City: Van Buren State: NC Zip Code: 72956

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 1.50

Transaction ID : f7facaf3-cc78-43af-8

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mary Johnson

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 80.00

Transaction ID : 4143b806-d600-4c67-8

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 81.50

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378925

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Casey Stockton

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 80.00

**Transaction ID : 45c66aa3-1b9e-4319-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Casey Stockton

Mailing Address 105 South Dale St

City: Spruce Pine State: NC Zip Code: 28777

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 22.20

**Transaction ID : fa3973c4-8978-4c4b-8**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 102.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378926

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amelia Brackett

Mailing Address 804 Roundabout Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
20.00

**Transaction ID : 86f0bb09-86d5-408b-9**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City Winchester | State VA | Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
40.00

**Transaction ID : 63f360c5-3f39-4466-8**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 60.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378927

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jazmine d Conner

Mailing Address 100 ASBURY CT

City: WINCHESTER State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 30.00

**Transaction ID : 23ad6a8d-ba9f-473d-b**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 40.00

**Transaction ID : c83523aa-0bf2-431c-8**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 70.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Thomas Dias

Mailing Address 110 Maryella Dr

City: Searcy State: AR Zip Code: 72143

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 40.00

**Transaction ID : 06f42d26-3302-437c-9**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 40.00

**Transaction ID : 32dec3ad-4f4e-44f0-8**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 80.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378929

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney D Culbreth

Date of Public Distribution/Dissemination
08 / 28 / 2014

Mailing Address
100 Asbury CT
3200 Dam Neck Rd

Amount
40.00

City: Winchester
State: VA
Zip Code: 22602

**Transaction ID : e5191638-e54a-4b6d-8**

Purpose of Expenditure
Salary

Category/Type: 001

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rze Culbreath

Date of Public Distribution/Dissemination
08 / 28 / 2014

Mailing Address
100 Asbury Ct

Amount
40.00

City: Winchester
State: VA
Zip Code: 22602

**Transaction ID : cbad1c77-86fa-4a61-9**

Purpose of Expenditure
Salary

Category/Type: 001

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 80.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378930

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Theresa a Youngblood

Mailing Address 102 S Main Street Apt A2

City: Berryville State: VA Zip Code: 22611

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 60.00

**Transaction ID : 721cccfc-b79a-4e14-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James Tatro

Mailing Address 1208 Braeburn Rd

City: Charlotte State: NC Zip Code: 28211

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 80.00

**Transaction ID : 7f2cd449-9a1d-4d68-8**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 140.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378931

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Tatro

Mailing Address 1208 Braeburn Rd

City: Charlotte State: NC Zip Code: 28211

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 6.90

**Transaction ID : 4824a654-0632-44c6-8**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 45.00

**Transaction ID : d87f93dc-a7f6-48be-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 51.90

**(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Chris McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 18.60

**Transaction ID : f02a6eec-b254-4051-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 115.00

**Transaction ID : 85cf661f-1a95-4013-8**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 133.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378933

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 22.80

**Transaction ID : b89bb392-2207-491b-9**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City: Greensboro State: NC Zip Code: 27407

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 105.00

**Transaction ID : 82c1c21c-731d-4ca8-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 127.80

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378934

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
21.90

**Transaction ID : 0e2d2ea9-85b1-4597-8**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Peggy A Sides

Mailing Address 2183 Spokane Rd

City Fayetteville State NC Zip Code 28304

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
60.00

**Transaction ID : e4d9f5c9-f534-43ab-8**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 81.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Peggy A Sides

Mailing Address 2183 Spokane Rd

City: Fayetteville State: NC Zip Code: 28304

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 6.00

**Transaction ID : 4ca8fd11-ffa8-474b-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought: 1095959.94

Disbursement For: ☐ Primary ☒ General 2014 ☐ Other (specify) ▶

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 80.00

**Transaction ID : 1809d72d-e60e-481f-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought: 1095959.94

Disbursement For: ☐ Primary ☒ General 2014 ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 86.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 28.59

**Transaction ID : 355b7d9f-4428-4522-9**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Holly M Tippett

Mailing Address 595 Saint Gabrielle Dr

City: Florissant State: MO Zip Code: 63033

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 20.00

**Transaction ID : f87f009d-88d4-464b-b**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 48.59

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Holly M Tippett

Mailing Address 595 Saint Gabrielle Dr

City: Florissant State: MO Zip Code: 63033

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 20.88

**Transaction ID : 9d42d2fa-32c7-438d-8**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eric J Smith

Mailing Address 4967 Dysartville

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 80.00

**Transaction ID : e9df3d58-a87c-4645-b**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 100.88

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378938

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 80.00

**Transaction ID : cc683ed9-7cfd-4890-a**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 9.00

**Transaction ID : ccfdeb8a-9af7-47f5-8**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 89.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378939

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City: Spindale State: NC Zip Code: 28160

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 40.00

**Transaction ID : 966851f8-404d-47a2-a**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
David Ford

Mailing Address 106 Hillside St

City: Spindale State: NC Zip Code: 28160

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 23.97

**Transaction ID : 5996a7d1-b46f-4985-b**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 63.97

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378940

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Beau Autin

Mailing Address 345 Auroura Ave

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 40.00

**Transaction ID : 13d26a1b-f1f3-4b39-a**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Beau Autin

Mailing Address 345 Auroura Ave

City: Metairie State: LA Zip Code: 70006

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 2.76

**Transaction ID : 72dcc8eb-17ae-4626-8**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 42.76

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378941

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Laura U Logie

Mailing Address 2565 Shire Circle

City Harrisonburg State VA Zip Code 22801

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
10.00

**Transaction ID : a805d0a7-0f20-451d-b**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Jodi Fountain

Mailing Address 1010 S Dogwood Drive

City Bogalusa State LA Zip Code 70427

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
40.00

**Transaction ID : 5bd923b7-868a-4277-8**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 50.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378942

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jodi Fountain

Mailing Address 1010 S Dogwood Drive

City: Bogalusa State: LA Zip Code: 70427

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 13.20

**Transaction ID : 1e55bfde-21e2-4af8-8**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Toni A Persinger-Buckler

Mailing Address 5330 Nestleway Dr

City: Clemmons State: NC Zip Code: 27012

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 20.00

**Transaction ID : d454b5a5-eb3e-4191-b**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 33.20

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378943

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Toni A Persinger-Buckler

Mailing Address 5330 Nestleway Dr

City: Clemmons State: NC Zip Code: 27012

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 6.39

**Transaction ID : 3079b6a1-7d94-4a00-8**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City: Shelby State: NC Zip Code: 28152

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 30.00

**Transaction ID : 19a35a24-6cd2-41de-a**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 36.39

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378944

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City: Shelby State: NC Zip Code: 28152

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 25.80

**Transaction ID : 7e5becc5-0111-4346-a**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Morgan E Hallenbeck

Mailing Address 3790 Christian Light Rd

City: Fuquay Varina State: NC Zip Code: 27526

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 70.00

**Transaction ID : 5a764fec-e398-4193-a**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 95.80

**(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.

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Morgan E Hallenbeck

Mailing Address 3790 Christian Light Rd

City: Fuquay Varina State: NC Zip Code: 27526

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 32.10

**Transaction ID : dfb2b0c8-d822-4629-a**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Laura U Logie

Mailing Address 2565 Shire Circle

City: Harrisonburg State: VA Zip Code: 22801

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 20.00

**Transaction ID : 49833566-311e-42cf-b**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 52.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 80.00

**Transaction ID : 1917368b-e758-4ddb-8**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 37.80

**Transaction ID : db9c8417-582f-40ce-a**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 117.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Stephanie L Heun

Mailing Address 8026 S Wilwood Dr Apt 101

City: Oak Creek State: WI Zip Code: 53154

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 28.30

**Transaction ID : d950391c-9f62-4477-8**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Amanda Boley

Mailing Address Split Oak Drive

City: charlotte State: NC Zip Code: 28227

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 57.50

**Transaction ID : 509402ef-1f98-43d5-a**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 85.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378948

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amanda Boley

Mailing Address
Split Oak Drive

City: charlotte
State: NC
Zip Code: 28227

Purpose of Expenditure
Mileage

Category/Type: 002

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
25.80

**Transaction ID : 703ad7a4-28a4-4500-a**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
William M Goldsmith

Mailing Address
211 Pearl St

City: Drexel
State: NC
Zip Code: 28619

Purpose of Expenditure
Salary

Category/Type: 001

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
90.00

**Transaction ID : f9ccc120-7bf6-4511-9**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 115.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378949

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
William M Goldsmith

Mailing Address 211 Pearl St

City: Drexel State: NC Zip Code: 28619

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 22.29

**Transaction ID : 73c56cf2-f690-4542-9**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Sharon t Craig

Mailing Address 1410 Bushville Dr

City: Lenoir State: NC Zip Code: 28645

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 50.00

**Transaction ID : bb86519c-b08d-42db-a**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 72.29

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378950

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Sharon t Craig

Mailing Address 1410 Bushville Dr

City Lenoir | State NC | Zip Code 28645

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
13.50

**Transaction ID : fd297ba8-cdf1-4d18-a**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Cynthia Stewart

Mailing Address 3001 Pendell Lane

City Ft. Smith | State AR | Zip Code 72901

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
80.00

**Transaction ID : f4c613d4-68a9-4fea-a**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 93.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378951

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Caleb Craig

Mailing Address 1410 Bushville drive

City Lenoir | State NC | Zip Code 28645

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
100.00

**Transaction ID : 0242b500-2f75-4c5b-b**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Caleb Craig

Mailing Address 1410 Bushville drive

City Lenoir | State NC | Zip Code 28645

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
9.00

**Transaction ID : 9dc70a6c-7819-4dbf-a**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 109.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378952

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
45.00

**Transaction ID : eea55f1e-1cbb-41fc-a**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 1095959.94

Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

Full Name of Payee
Daniel E Collison

Mailing Address 3315 Cardinal Ridge Rd

City Greensboro State NC Zip Code 27410

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
24.60

**Transaction ID : 323744ac-646d-4888-b**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 1095959.94

Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 69.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378953

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lisa Miller

Date of Public Distribution/Dissemination
08 / 29 / 2014

Mailing Address 718 Azalea Dr.
Unit 453

Amount
53.00

City: Hampstead State: NC Zip Code: 28443

**Transaction ID : 91b14db1-0246-4c14-9**

Purpose of Expenditure
Salary

Category/Type 001

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lisa Miller

Date of Public Distribution/Dissemination
08 / 29 / 2014

Mailing Address 718 Azalea Dr.
Unit 453

Amount
6.09

City: Hampstead State: NC Zip Code: 28443

**Transaction ID : 7b0d7d4c-0613-4133-9**

Purpose of Expenditure
Mileage

Category/Type 002

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 59.09

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378954

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City: Search | State: AR | Zip Code: 72149

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 30.00

**Transaction ID : b48c0f1d-0132-44c8-a**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City: Raleigh | State: NC | Zip Code: 27610

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 11.50

**Transaction ID : 6eb02bba-777e-48a3-a**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 41.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378955

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Diane Smith

Mailing Address 4006 Wolkswalk Place

City Raleigh | State NC | Zip Code 27610

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
3.00

**Transaction ID : f1081885-f559-4e26-b**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport | State LA | Zip Code 71104

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
80.00

**Transaction ID : 31437167-3c5c-4227-8**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 83.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378956

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
51.60

**Transaction ID : 0947d79f-694c-4c6f-b**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
80.00

**Transaction ID : e56381b7-f722-4488-9**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 131.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378957

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport | State LA | Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
51.60

**Transaction ID : f8c6c605-f14f-465d-a**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jacob S Mann

Mailing Address 3875 Old Stage Rd S

City Erwin | State NC | Zip Code 28339

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
70.00

**Transaction ID : fa37723c-fe5c-4281-9**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 121.60

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378958

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jacob S Mann

Mailing Address 3875 Old Stage Rd S

City: Erwin State: NC Zip Code: 28339

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 34.50

**Transaction ID : 5f28718f-1b1a-4963-8**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Joneisha Stewart

Mailing Address 2329 Runnymede Dr

City: Marrero State: LA Zip Code: 70072

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 50.00

**Transaction ID : db5a8814-d4d0-46b1-8**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 84.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378959

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francesca Blom

Mailing Address 101 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 70.00

**Transaction ID : f3aad221-3718-496a-b**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mattie Harris

Mailing Address 3654 Tara St

City: springdale State: AR Zip Code: 72762

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 80.00

**Transaction ID : a841b512-8e50-4f04-9**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 150.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Sue G Walker

Mailing Address 3 Girard

City: Fort Smith State: AR Zip Code: 72901

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 80.00

**Transaction ID : 24aeaba5-3064-4a66-9**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carol L Walters

Mailing Address 1900 Glen West Way

City: Fort Smith State: AR Zip Code: 72916

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 90.00

**Transaction ID : 1d8d57ed-8cc9-4bdc-8**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 170.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carol L Walters

Mailing Address 1900 Glen West Way

City: Fort Smith State: AR Zip Code: 72916

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 105.00

**Transaction ID : 521ee8c8-842a-4f84-8**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carol L Walters

Mailing Address 1900 Glen West Way

City: Fort Smith State: AR Zip Code: 72916

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 90.00

**Transaction ID : aecd8485-a9cc-456b-a**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 195.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378962

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carol L Walters

Mailing Address 1900 Glen West Way

City: Fort Smith State: AR Zip Code: 72916

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 105.00

**Transaction ID : 32e91fd2-a382-49c9-b**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 50.00

**Transaction ID : 556a2e80-2380-4ac2-9**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 155.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378963

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 24.60

**Transaction ID : 8541ed35-2882-4287-9**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Randy M Gold

Mailing Address 1436 Haigs Creek Dr

City: Elgin State: SC Zip Code: 29045

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 35.00

**Transaction ID : b65a475f-b458-4670-b**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 59.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378964

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Randy M Gold

Mailing Address 1436 Haigs Creek Dr

City: Elgin State: SC Zip Code: 29045

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 26.91

**Transaction ID : a55b362c-7ce3-42ff-a**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kaleigh J Wagner

Mailing Address 18065 Wayne Rd

City: Odessa State: FL Zip Code: 33556

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 35.00

**Transaction ID : 3710f3e7-f014-4db8-b**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 61.91

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951378965

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City Raleigh | State NC | Zip Code 27604

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
75.00

**Transaction ID : 85e68245-e53d-4eac-a**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City Raleigh | State NC | Zip Code 27604

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
7.80

**Transaction ID : 5d6c0313-14fc-440a-b**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 82.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378966

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Theresa a Youngblood

Mailing Address 102 S Main Street Apt A2

City: Berryville State: VA Zip Code: 22611

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 85.00

**Transaction ID : a37ab214-1019-403b-9**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Timothy Foley

Mailing Address 20679 Glenbrook Terrace

City: Sterling State: VA Zip Code: 20165

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 70.00

**Transaction ID : b444a75b-7b72-4c1c-8**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 155.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378967

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lucas H Hoyle

Mailing Address 282 Falls Ave

City: Granite Falls State: NC Zip Code: 28630

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 30.00

**Transaction ID : b8e1ee1a-842e-4830-8**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lucas H Hoyle

Mailing Address 282 Falls Ave

City: Granite Falls State: NC Zip Code: 28630

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 16.20

**Transaction ID : c8572211-24e3-44a2-8**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 46.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 40.00

**Transaction ID : cef47490-7434-4ac4-b**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 25.38

**Transaction ID : e2102c22-bc46-4f09-b**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 65.38

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378969

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 50.00

**Transaction ID : 3f308056-6b79-4576-8**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jeanne Tribou

Mailing Address 22369 Ponderosa Dr.

City: Mandeville State: LA Zip Code: 70471

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 9.90

**Transaction ID : d6f4408a-ad2a-49a6-9**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 59.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378970

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 55.00

**Transaction ID : aebc6ce8-2fd3-48f8-8**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Bradley K Kissinger

Mailing Address 3113 Imperial Valley Dr.

City: Little Rock State: AR Zip Code: 72212

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 18.30

**Transaction ID : f0776359-3a8f-4b86-8**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 73.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378971

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City Winchester | State VA | Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
70.00

**Transaction ID : 2ff5e581-6292-4d40-9**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jazmine d Conner

Mailing Address 100 ASBURY CT

City WINCHESTER | State VA | Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
60.00

**Transaction ID : c6878ef0-8eae-447b-b**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 130.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378972

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City Winchester State VA Zip Code 22602

Purpose of Expenditure Salary

Category/Type 001

Date of Public Distribution/Dissemination 08 / 29 / 2014

Amount 60.00

**Transaction ID : f778afe5-c1e2-4cb0-a**

Date of Disbursement or Obligation 08 / 29 / 2014

Name of Federal Candidate Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City Winchester State VA Zip Code 22602

Purpose of Expenditure Salary

Category/Type 001

Date of Public Distribution/Dissemination 08 / 29 / 2014

Amount 70.00

**Transaction ID : aa2f45dd-dc1f-41a4-8**

Date of Disbursement or Obligation 08 / 29 / 2014

Name of Federal Candidate Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 130.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951378973

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney D Culbreth

Date of Public Distribution/Dissemination
08 / 29 / 2014

Mailing Address
100 Asbury CT
3200 Dam Neck Rd

Amount
70.00

City: Winchester
State: VA
Zip Code: 22602

**Transaction ID : 2add04b8-3bde-453d-9**

Purpose of Expenditure
Salary

Category/Type: 001

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Rze Culbreath

Date of Public Distribution/Dissemination
08 / 29 / 2014

Mailing Address
100 Asbury Ct

Amount
70.00

City: Winchester
State: VA
Zip Code: 22602

**Transaction ID : 60beecd4-22fa-4ebd-b**

Purpose of Expenditure
Salary

Category/Type: 001

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 140.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378974

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 25.00

**Transaction ID : a43a47a0-a0da-4938-8**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 1.44

**Transaction ID : 85ab48df-630b-47c8-9**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 26.44

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378975

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City: Wilmington State: NC Zip Code: 28405

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 50.00

**Transaction ID : 28fea9d2-5b82-4c24-9**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City: Wilmington State: NC Zip Code: 28405

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 21.30

**Transaction ID : 3222f259-4768-4f92-9**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 71.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378976

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
70.00

**Transaction ID : df3c3fb2-a606-40eb-8**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
1.50

**Transaction ID : f1441d82-fddb-4ca4-b**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 71.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378977

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 40.00

**Transaction ID : d4894104-f7a2-4b22-8**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 17.10

**Transaction ID : ef50bcb4-3418-43ed-9**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 57.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378978

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
75.00

**Transaction ID : 80e57703-43f5-4915-a**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 29 / 2014

Amount
20.40

**Transaction ID : cbec8480-fa2f-4c3f-b**

Date of Disbursement or Obligation
08 / 29 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 95.40

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378979

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Tatro

Mailing Address 1208 Braeburn Rd

City: Charlotte State: NC Zip Code: 28211

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 35.00

**Transaction ID : 02c99848-3a70-4e0d-a**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James Tatro

Mailing Address 1208 Braeburn Rd

City: Charlotte State: NC Zip Code: 28211

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 3.90

**Transaction ID : 1c6d7dc5-a040-416d-b**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 38.90

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378980

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Roger McKinney

Mailing Address 308 West Main Street

City: Pilot Mountian State: NC Zip Code: 27041

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 40.00

**Transaction ID : e1e1a810-d5cb-4cf5-b**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Mr. Roger McKinney

Mailing Address 308 West Main Street

City: Pilot Mountian State: NC Zip Code: 27041

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 14.10

**Transaction ID : 189f8219-d849-4a41-9**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 54.10

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378981

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 70.00

**Transaction ID : 9f39a566-9c6e-4a67-8**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 10.50

**Transaction ID : a1bfb65e-096f-4722-b**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 80.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378982

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 50.00

**Transaction ID : 8634aeee-b55d-43cc-b**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 10.50

**Transaction ID : 73886164-c4ab-48b8-8**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 60.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378983

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Billy Martin

Mailing Address 250 JS Brewton rd

City goldonna State LA Zip Code 71031

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
50.00

**Transaction ID : c7c04f54-cc1b-473f-8**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Billy Martin

Mailing Address 250 JS Brewton rd

City goldonna State LA Zip Code 71031

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
3.00

**Transaction ID : 16b4311a-9090-46c1-a**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 53.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378984

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Laura U Logie

Mailing Address 2565 Shire Circle

City Harrisonburg State VA Zip Code 22801

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
20.00

**Transaction ID : 66574dfa-489a-452f-a**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Matt Curran

Mailing Address 1537 Country Lane

City Kernersville State NC Zip Code 27284

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
45.00

**Transaction ID : 65455c99-11f8-4728-b**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 65.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378985

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Matt Curran

Mailing Address 1537 Country Lane

City Kernersville | State NC | Zip Code 27284

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
15.09

**Transaction ID : 23d2cd80-0b88-47ce-b**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Caleb Craig

Mailing Address 1410 Bushville drive

City Lenoir | State NC | Zip Code 28645

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
80.00

**Transaction ID : 06e465b7-2fd3-4a40-b**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 95.09

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378986

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Caleb Craig

Mailing Address 1410 Bushville drive

City Lenoir | State NC | Zip Code 28645

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
27.00

**Transaction ID : 909a1c0d-db47-4c14-a**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Elizabeth M Moore

Mailing Address 1223 Silver Sage Dr Apt 303

City Raleigh | State NC | Zip Code 27606

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
20.00

**Transaction ID : 85eb115f-5fa4-4994-8**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 47.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378987

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Elizabeth M Moore

Mailing Address 1223 Silver Sage Dr Apt 303

City: Raleigh State: NC Zip Code: 27606

Purpose of Expenditure: Mileage

Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 5.28

**Transaction ID : e4c876ad-88b3-44ff-9**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Eric J Smith

Mailing Address 4967 Dysartville

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 80.00

**Transaction ID : faa1c841-9fce-47a2-b**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 85.28

(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eric J Smith

Mailing Address 4967 Dysartville

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 6.60

**Transaction ID : 38d64871-110c-4218-9**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jennifer E Smith

Mailing Address 4967 Dysartsville Rd

City: Morganton State: NC Zip Code: 28655

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 80.00

**Transaction ID : 7470ac8a-d3d9-4ad2-9**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 86.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378989

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Claire A Smith

Mailing Address 6610 Walcott Rd

City Paragoud State AR Zip Code 72450

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
50.00

**Transaction ID : ff67fd23-bfa2-46e9-b**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Claire A Smith

Mailing Address 6610 Walcott Rd

City Paragoud State AR Zip Code 72450

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
8.61

**Transaction ID : 620b5170-b343-4e44-9**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 58.61

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378990

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christine B Long

Mailing Address 3121 Charleycote Dr

City Raleigh State NC Zip Code 27614

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
20.00

**Transaction ID : cd0425e6-98d3-4b7d-9**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Christine B Long

Mailing Address 3121 Charleycote Dr

City Raleigh State NC Zip Code 27614

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
15.42

**Transaction ID : 9f9bd34a-ffcc-47a8-9**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 35.42

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378991

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City Raleigh | State NC | Zip Code 27604

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
20.00

**Transaction ID : 805ec158-fe90-42fb-8**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lee R Carter

Mailing Address 3110 Brentwood Rd

City Raleigh | State NC | Zip Code 27604

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
6.30

**Transaction ID : cd8ca432-54b9-44e5-a**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 26.30

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378992

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
James Kindstedt

Mailing Address 5510 Dogwood Dr

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 42.50

**Transaction ID : 4f25c504-f59f-4fc1-a**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
James Kindstedt

Mailing Address 5510 Dogwood Dr

City: Winston Salem State: NC Zip Code: 27105

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 18.21

**Transaction ID : 6e59472b-a02b-43bf-b**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 60.71

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378993

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Carol L Snow

Mailing Address 6281 Jenkins rd

City Morganton State NC Zip Code 28655

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
10.00

**Transaction ID : c11331d2-2dbb-4c31-b**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Carol L Snow

Mailing Address 6281 Jenkins rd

City Morganton State NC Zip Code 28655

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
5.70

**Transaction ID : 67172bbe-702b-4af3-9**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 15.70

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378994

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Joanna Kindstedt

Mailing Address 2134 Tobaccoville Rd

City: Rural Hall State: NC Zip Code: 27045

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 42.50

**Transaction ID : 571825c2-2111-4000-8**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Holly M Tippett

Mailing Address 595 Saint Gabrielle Dr

City: Florissant State: MO Zip Code: 63033

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 30.00

**Transaction ID : 1223bd3a-f045-4218-9**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 72.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378995

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Heather N Montgomery

Mailing Address 106 Wyncrest Ct

City Hendersonville State TN Zip Code 37075

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
55.00

**Transaction ID : 01e107ec-bf19-456e-a**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Kinsey E Beck

Mailing Address 103 Glenhaven Ct

City Harvest State AL Zip Code 35749

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
55.00

**Transaction ID : 024b98a0-1177-4d80-a**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 110.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kinsey E Beck

Mailing Address 103 Glenhaven Ct

City Harvest | State AL | Zip Code 35749

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
55.50

**Transaction ID : a142d4c2-7853-4d29-9**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Gregory Green
Originally reported against Kay Hagan, corrected with filing

Mailing Address 2506 Bolch Street

City Shreveport | State LA | Zip Code 71104

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
50.00

**Transaction ID : 69beba9a-bb5d-4a26-8**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 105.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378997

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Gregory Green
Originally reported against Kay Hagan, corrected with filing

Mailing Address 2506 Bolch Street

City Shreveport State LA Zip Code 71104

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination 08 / 30 / 2014

Amount 14.40

**Transaction ID : 7ee6639d-b545-484e-8**

Date of Disbursement or Obligation 08 / 30 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport State LA Zip Code 71119

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination 08 / 30 / 2014

Amount 50.00

**Transaction ID : 79a61246-f5c1-4d7c-8**

Date of Disbursement or Obligation 08 / 30 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 64.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951378998

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lily Green

Mailing Address 205 Medallion Circle

City Shreveport | State LA | Zip Code 71119

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
15.00

**Transaction ID : e7eeead4-15ea-4824-9**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Lucas H Hoyle

Mailing Address 282 Falls Ave

City Granite Falls | State NC | Zip Code 28630

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
40.00

**Transaction ID : 57124aae-7d7a-460d-9**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 55.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lucas H Hoyle

Mailing Address 282 Falls Ave

City: Granite Falls State: NC Zip Code: 28630

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 28.20

**Transaction ID : c8d2804a-75b2-4fd1-9**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City: Shelby State: NC Zip Code: 28152

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 65.00

**Transaction ID : ca7f7855-0693-4d46-8**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 93.20

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379000

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nick Berryhill

Mailing Address 905 Lake Drive

City Shelby | State NC | Zip Code 28152

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
33.75

**Transaction ID : 614cff73-49a7-43af-b**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE | State LA | Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
85.00

**Transaction ID : ad6fd29d-504c-42c8-9**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 118.75

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379001

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
1.50

**Transaction ID : 39f87d2c-14f3-48a8-9**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Shantal C Culbreath

Mailing Address 4691 Hercules Lane

City Woodbridge State VA Zip Code 22193

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
80.00

**Transaction ID : fd1c360b-012f-4472-a**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 81.50

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379002

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francesca Blom

Mailing Address 101 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 60.00

**Transaction ID : 20872f0b-f56a-494b-b**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 55.00

**Transaction ID : 9568d99a-c73d-4478-b**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 115.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379003

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ralph Smith

Mailing Address 2090 Fancy Gap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 25.44

**Transaction ID : e8f7d76b-2d3c-44e3-b**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 25.00

**Transaction ID : 488431f4-0ce5-4b7d-b**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 50.44

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379004

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City Lafayette | State LA | Zip Code 70503

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
1.17

**Transaction ID : de6ffa1c-41f4-44ae-8**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christine Stevens

Mailing Address 100 Asbury Ct

City Winchester | State VA | Zip Code 22602

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
40.00

**Transaction ID : df79fb66-b26b-4dcd-b**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 41.17

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379005

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jazmine d Conner

Mailing Address 100 ASBURY CT

City: WINCHESTER State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 40.00

**Transaction ID : 74c64454-1c79-4755-9**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jon E Conner

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 40.00

**Transaction ID : 0b3a4ddd-46c6-4ab9-9**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 80.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379006

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rodney O Culbreath

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 40.00

**Transaction ID : fa16fd86-4e61-4a8d-8**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Rodney D Culbreth

Mailing Address 100 Asbury CT
3200 Dam Neck Rd

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 40.00

**Transaction ID : 3bd94e9e-553f-49dd-a**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 80.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379007

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rze Culbreath

Mailing Address 100 Asbury Ct

City: Winchester State: VA Zip Code: 22602

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 40.00

**Transaction ID : d5f854cb-9555-4473-8**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Randy M Gold

Mailing Address 1436 Haigs Creek Dr

City: Elgin State: SC Zip Code: 29045

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 130.00

**Transaction ID : 92e6a143-0260-46a5-b**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 170.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Randy M Gold

Mailing Address 1436 Haigs Creek Dr

City: Elgin State: SC Zip Code: 29045

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 74.04

**Transaction ID : 253d6bae-6952-4872-8**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kaleigh J Wagner

Mailing Address 18065 Wayne Rd

City: Odessa State: FL Zip Code: 33556

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 130.00

**Transaction ID : 2f97f2ff-99a1-4f3e-a**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 204.04

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379009

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City Search | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
50.00

**Transaction ID : 3b6e6c64-459b-4e66-8**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Anthony Pearson

Mailing Address 112 apache Dr

City Search | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
31.50

**Transaction ID : 03003c8b-ecd3-47ee-a**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 81.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379010

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City: Wilmington State: NC Zip Code: 28405

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 70.00

**Transaction ID : 7b7aea1a-aeb5-4b32-9**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tracy M Hargett

Mailing Address 5133 Lord Bryon Road

City: Wilmington State: NC Zip Code: 28405

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 16.80

**Transaction ID : d89d5f0f-2738-4d3a-8**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 86.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379011

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Amelia Brackett

Mailing Address 804 Roundabout Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
30.00

**Transaction ID : 39885294-8097-46a8-b**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Amelia Brackett

Mailing Address 804 Roundabout Circle

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
21.90

**Transaction ID : 127fb52d-99b5-4d66-a**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 51.90

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379012

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Parker H Morrow

Mailing Address 506 N Horton Street

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
40.00

**Transaction ID : 29d242f1-45d4-4dd3-b**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Parker H Morrow

Mailing Address 506 N Horton Street

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
24.00

**Transaction ID : 4c139911-6172-4ec5-8**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 64.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379013

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Rebecca A Shearer

Mailing Address 6544 Arno College Grove Rd

City: College Grove | State: TN | Zip Code: 37046

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 90.00

**Transaction ID : 94710355-518f-461c-8**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Parker H Morrow

Mailing Address 506 N Horton Street

City: Searcy | State: AR | Zip Code: 72143

Purpose of Expenditure: Salary | Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 90.00

**Transaction ID : 18eacb23-b021-4c64-9**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 180.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Parker H Morrow

Mailing Address 506 N Horton Street

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
61.80

**Transaction ID : f34c2ff4-a4e7-465d-b**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Theresa a Youngblood

Mailing Address 102 S Main Street Apt A2

City Berryville | State VA | Zip Code 22611

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
80.00

**Transaction ID : 1f4a6627-d98a-4462-a**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 141.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jackson S Tuttle

Mailing Address 404 Chancery Park Ct

City: Kernersville State: NC Zip Code: 27284

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 70.00

**Transaction ID : 52bdb8cb-65d6-44f4-a**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jackson S Tuttle

Mailing Address 404 Chancery Park Ct

City: Kernersville State: NC Zip Code: 27284

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 6.30

**Transaction ID : e1efc76f-091d-4341-a**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 76.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379016

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
75.00

**Transaction ID : 7ede03ce-3206-45db-8**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
17.70

**Transaction ID : b1b14ddc-4565-4d5c-8**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 92.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379017

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 40.00

**Transaction ID : 2a56bf5c-ba52-497f-a**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 14.70

**Transaction ID : 1e03cc8d-d67a-46cd-9**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 54.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379018

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
36.60

**Transaction ID : d7132df1-434e-408d-b**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Jeffrey Hampton

Mailing Address 1700 E Part Ave

City Searcy | State AR | Zip Code 72149

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 30 / 2014

Amount
19.53

**Transaction ID : f4084911-3a35-4cd2-b**

Date of Disbursement or Obligation
08 / 30 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 56.13

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379019

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 55.00

**Transaction ID : b7fcad68-6391-4bbd-a**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 25.89

**Transaction ID : 06c5dcca-5873-4744-8**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 80.89

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379020

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brandon Wheeler

Mailing Address 10112 Piney Creek Ct

City: Charolette State: NC Zip Code: 28215

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 50.00

**Transaction ID : ab739486-d2d3-443b-9**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brandon Wheeler

Mailing Address 10112 Piney Creek Ct

City: Charolette State: NC Zip Code: 28215

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 30 / 2014

Amount: 25.50

**Transaction ID : dabbbdfc-bcce-430e-a**

Date of Disbursement or Obligation: 08 / 30 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 75.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379021

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Parker H Morrow

Mailing Address 506 N Horton Street

City Searcy State AR Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 31 / 2014

Amount
90.00

**Transaction ID : 2cace1c4-20a7-42a8-9**

Date of Disbursement or Obligation
08 / 31 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Parker H Morrow

Mailing Address 506 N Horton Street

City Searcy State AR Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 31 / 2014

Amount
61.80

**Transaction ID : eccde826-fafa-4251-8**

Date of Disbursement or Obligation
08 / 31 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 151.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Claire A Smith

Mailing Address 6610 Walcott Rd

City: Paragoud State: AR Zip Code: 72450

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 31 / 2014

Amount: 20.00

**Transaction ID : 18efad22-d2d1-4638-a**

Date of Disbursement or Obligation: 08 / 31 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Claire A Smith

Mailing Address 6610 Walcott Rd

City: Paragoud State: AR Zip Code: 72450

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 31 / 2014

Amount: 3.00

**Transaction ID : cf1f2cd7-ccfc-4296-a**

Date of Disbursement or Obligation: 08 / 31 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 23.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379023

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on MM / DD / YYYY

Full Name of Payee
Jackson S Tuttle

Mailing Address 404 Chancery Park Ct

City: Kernersville State: NC Zip Code: 27284

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 31 / 2014

Amount: 35.00

**Transaction ID : f69432e4-1d2c-413d-b**

Date of Disbursement or Obligation: 08 / 31 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jackson S Tuttle

Mailing Address 404 Chancery Park Ct

City: Kernersville State: NC Zip Code: 27284

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 31 / 2014

Amount: 6.00

**Transaction ID : 4be51a67-6d75-4ad1-b**

Date of Disbursement or Obligation: 08 / 31 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 41.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379024

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Heather N Montgomery

Mailing Address 106 Wyncrest Ct

City Hendersonville State TN Zip Code 37075

Purpose of Expenditure Salary

Category/Type 001

Date of Public Distribution/Dissemination 08 / 31 / 2014

Amount 50.00

**Transaction ID : 35978a26-cda8-4dd7-b**

Date of Disbursement or Obligation 08 / 31 / 2014

Name of Federal Candidate Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kinsey E Beck

Mailing Address 103 Glenhaven Ct

City Harvest State AL Zip Code 35749

Purpose of Expenditure Salary

Category/Type 001

Date of Public Distribution/Dissemination 08 / 31 / 2014

Amount 50.00

**Transaction ID : 4255f09b-9edc-463b-b**

Date of Disbursement or Obligation 08 / 31 / 2014

Name of Federal Candidate Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 100.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951379025

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kinsey E Beck

Mailing Address 103 Glenhaven Ct

City Harvest | State AL | Zip Code 35749

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 31 / 2014

Amount
55.50

**Transaction ID : 1af0cfa4-c861-4487-a**

Date of Disbursement or Obligation
08 / 31 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City Ville Platte | State LA | Zip Code 70586

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 31 / 2014

Amount
40.00

**Transaction ID : 6190724c-0010-4d60-a**

Date of Disbursement or Obligation
08 / 31 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 95.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379026

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Christopher Marquess

Mailing Address 110 W Pecan St

City: Ville Platte State: LA Zip Code: 70586

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 31 / 2014

Amount: 28.50

**Transaction ID : 4473dfac-d791-4b20-9**

Date of Disbursement or Obligation: 08 / 31 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 31 / 2014

Amount: 80.00

**Transaction ID : 8d033e8e-a87d-40ef-8**

Date of Disbursement or Obligation: 08 / 31 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 108.50

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379027

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tammay Williams

Mailing Address 924 N. Prieur St

City: New Orleans State: LA Zip Code: 70116

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 31 / 2014

Amount: 9.00

**Transaction ID : b8da47a7-65db-46ee-b**

Date of Disbursement or Obligation: 08 / 31 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Joneisha Stewart

Mailing Address 2329 Runnymede Dr

City: Marrero State: LA Zip Code: 70072

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 31 / 2014

Amount: 40.00

**Transaction ID : b5107c09-10ee-48ef-9**

Date of Disbursement or Obligation: 08 / 31 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 49.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379028

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Jacob L Colbert

Mailing Address 49 Sharon Circle

City: Greenbrier State: AR Zip Code: 72058

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 31 / 2014

Amount: 15.00

**Transaction ID : 2dd0a01a-5e61-4d92-9**

Date of Disbursement or Obligation: 08 / 31 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Jacob L Colbert

Mailing Address 49 Sharon Circle

City: Greenbrier State: AR Zip Code: 72058

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 31 / 2014

Amount: 11.40

**Transaction ID : 793909b7-f74d-4318-8**

Date of Disbursement or Obligation: 08 / 31 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 26.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379029

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kaleigh J Wagner

Mailing Address 18065 Wayne Rd

City: Odessa State: FL Zip Code: 33556

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 31 / 2014

Amount: 80.00

**Transaction ID : 9b84a65b-25eb-41bc-a**

Date of Disbursement or Obligation: 08 / 31 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Randy M Gold

Mailing Address 1436 Haigs Creek Dr

City: Elgin State: SC Zip Code: 29045

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 31 / 2014

Amount: 80.00

**Transaction ID : b86f04f7-1c66-4f5b-8**

Date of Disbursement or Obligation: 08 / 31 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 160.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379030

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Randy M Gold

Mailing Address 1436 Haigs Creek Dr

City: Elgin State: SC Zip Code: 29045

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 31 / 2014

Amount: 64.08

**Transaction ID : 8616672d-2881-45e4-a**

Date of Disbursement or Obligation: 08 / 31 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City: Lafayette State: LA Zip Code: 70503

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 31 / 2014

Amount: 20.00

**Transaction ID : 9af37818-b4a9-489e-a**

Date of Disbursement or Obligation: 08 / 31 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 84.08

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379031

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Francis Richardson

Mailing Address 220 Doucet Rd

City Lafayette | State LA | Zip Code 70503

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 31 / 2014

Amount
1.44

**Transaction ID : 09e4554b-40f7-4b8a-8**

Date of Disbursement or Obligation
08 / 31 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE | State LA | Zip Code 70003

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 31 / 2014

Amount
75.00

**Transaction ID : 6dce0dd7-1e92-4f56-b**

Date of Disbursement or Obligation
08 / 31 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 76.44

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES



NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
ERIC TABARY

Mailing Address 6101 NORA ST

City METAIRIE State LA Zip Code 70003

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 31 / 2014

Amount
1.80

**Transaction ID : 964401c9-1be1-4909-9**

Date of Disbursement or Obligation
08 / 31 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Mr. Elizabeth Allison

Mailing Address 157 Bishop Drive

City Avondale State LA Zip Code 70094

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 31 / 2014

Amount
31.00

**Transaction ID : 67b3f8ff-4d1d-43cf-8**

Date of Disbursement or Obligation
08 / 31 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 32.80

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379033

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Mr. Elizabeth Allison

Mailing Address 157 Bishop Drive

City: Avondale State: LA Zip Code: 70094

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 31 / 2014

Amount: 4.20

**Transaction ID : b6951e1a-9b1a-4941-8**

Date of Disbursement or Obligation: 08 / 31 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Vonniqua Jackson

Mailing Address 111 Westchester Blvd
Apt D4

City: Slidell State: LA Zip Code: 70458

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 31 / 2014

Amount: 50.00

**Transaction ID : 4a4576ab-6f12-46e8-8**

Date of Disbursement or Obligation: 08 / 31 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 54.20

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379034

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 31 / 2014

Amount: 60.00

**Transaction ID : a7dd9ba7-8122-469e-b**

Date of Disbursement or Obligation: 08 / 31 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Kelly Dolan

Mailing Address 543 S 2nd St

City: Bellaire State: NC Zip Code: 77401

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 31 / 2014

Amount: 9.00

**Transaction ID : 3275f654-65fc-45b1-b**

Date of Disbursement or Obligation: 08 / 31 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 69.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379035

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 31 / 2014

Amount: 20.00

**Transaction ID : 0fbcd3ba-f50f-45c4-9**

Date of Disbursement or Obligation: 08 / 31 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Danielle McCoy

Mailing Address 1025 Cayley Ct

City: High Point State: NC Zip Code: 27260

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 31 / 2014

Amount: 11.70

**Transaction ID : 0364d05b-32b3-4e56-a**

Date of Disbursement or Obligation: 08 / 31 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 31.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379036

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 31 / 2014

Amount
75.00

**Transaction ID : 854aaf45-82f1-454c-a**

Date of Disbursement or Obligation
08 / 31 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Eleanor McCoy

Mailing Address 4902 Catawba Dr

City Greensboro State NC Zip Code 27407

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 31 / 2014

Amount
20.40

**Transaction ID : 890fd216-ce0e-47bc-8**

Date of Disbursement or Obligation
08 / 31 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 95.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379037

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 31 / 2014

Amount: 70.00

**Transaction ID : be987467-f251-4283-a**

Date of Disbursement or Obligation: 08 / 31 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Tylan S Green

Mailing Address 2320 Saint Nick Dr

City: New Orleans State: LA Zip Code: 70131

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 31 / 2014

Amount: 10.80

**Transaction ID : 509a567b-cc24-4a6b-9**

Date of Disbursement or Obligation: 08 / 31 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 80.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379038

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Parker H Morrow

Mailing Address 506 N Horton Street

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
40.00

**Transaction ID : 4dabfe74-dcaf-4de1-b**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Parker H Morrow

Mailing Address 506 N Horton Street

City Searcy | State AR | Zip Code 72143

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 28 / 2014

Amount
31.50

**Transaction ID : c1f5b097-501f-4343-8**

Date of Disbursement or Obligation
08 / 28 / 2014

Name of Federal Candidate
Mr. Mark L Pryor

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014
292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 71.50

**(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.

*Ms. Emily Buchanan*
***[Electronically Filed]***
Signature

Date 05 / 14 / 2015

Image# 15951379039

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 30.00

**Transaction ID : 46c5434d-542a-42e9-b**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Ms. Tonya Boyd

Mailing Address 2357 Fancy Cap Rd

City: Mt. Airy State: NC Zip Code: 27030

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 29 / 2014

Amount: 25.29

**Transaction ID : 6190b925-de4c-4156-8**

Date of Disbursement or Obligation: 08 / 29 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 55.29

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379040

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City Saltville State VA Zip Code 24370

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
70.00

**Transaction ID : e57233d4-6f09-4a99-9**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City Saltville State VA Zip Code 24370

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 26 / 2014

Amount
38.70

**Transaction ID : 4f9c5073-98f5-4448-b**

Date of Disbursement or Obligation
08 / 26 / 2014

Name of Federal Candidate
Ms. Kay Hagan

☐ Support
☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: NC

Calendar Year-To-Date Per Election for Office Sought 2014
1095959.94

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 108.70

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379041

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 60.00

**Transaction ID : b21bc088-9172-4d58-b**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 27 / 2014

Amount: 32.40

**Transaction ID : 2cd645c1-4aea-4229-a**

Date of Disbursement or Obligation: 08 / 27 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 92.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379042

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 100.00

**Transaction ID : 440e2cc5-cfdc-436a-b**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Serena A Jones

Mailing Address 7151 Mullins Drive

City: Saltville State: VA Zip Code: 24370

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 41.10

**Transaction ID : b3d01817-0a61-4f48-8**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Ms. Kay Hagan
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: NC

Calendar Year-To-Date Per Election for Office Sought 2014: 1095959.94

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 141.10

**(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379043

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Chinchar

Mailing Address 2730 Dave Ward Dr

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 30.00

**Transaction ID : 40653335-c09e-4632-a**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Chinchar

Mailing Address 2730 Dave Ward Dr

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 5.40

**Transaction ID : bc31a7aa-0f13-4409-b**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 35.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379044

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Chinchar

Mailing Address 2730 Dave Ward Dr

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 30.00

**Transaction ID : 6f6b0b16-ea88-4503-a**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Chinchar

Mailing Address 2730 Dave Ward Dr

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 5.40

**Transaction ID : 08ce270c-85c7-491c-8**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 35.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379045

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Michael Chinchar

Mailing Address 2730 Dave Ward Dr

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 40.00

**Transaction ID : 12050379-59d9-4c36-a**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Michael Chinchar

Mailing Address 2730 Dave Ward Dr

City: Conway State: AR Zip Code: 72034

Purpose of Expenditure: Mileage
Category/Type: 002

Date of Public Distribution/Dissemination: 08 / 28 / 2014

Amount: 6.00

**Transaction ID : f05c4b45-d9c6-4d90-9**

Date of Disbursement or Obligation: 08 / 28 / 2014

Name of Federal Candidate: Mr. Mark L Pryor
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: AR

Calendar Year-To-Date Per Election for Office Sought 2014: 292370.62

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 46.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379046

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brogan A Benoit

Mailing Address 7144 South River Rd

City Addis | State LA | Zip Code 70710

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
30.00

**Transaction ID : 177d090c-e82b-47d1-8**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Brogan A Benoit

Mailing Address 7144 South River Rd

City Addis | State LA | Zip Code 70710

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 12 / 2014

Amount
4.80

**Transaction ID : 6f9d9910-6638-488d-b**

Date of Disbursement or Obligation
08 / 12 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 34.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379047

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brogan A Benoit

Mailing Address 7144 South River Rd

City Addis | State LA | Zip Code 70710

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 16 / 2014

Amount
50.00

**Transaction ID : b6c5498a-5d1f-4faf-9**

Date of Disbursement or Obligation
08 / 16 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brogan A Benoit

Mailing Address 7144 South River Rd

City Addis | State LA | Zip Code 70710

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 16 / 2014

Amount
8.40

**Transaction ID : b2502315-0498-4b54-b**

Date of Disbursement or Obligation
08 / 16 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 58.40

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379048

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brogan A Benoit

Mailing Address 7144 South River Rd

City Addis | State LA | Zip Code 70710

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 17 / 2014

Amount
40.00

**Transaction ID : 21ebbf69-56bc-4801-a**

Date of Disbursement or Obligation
08 / 17 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brogan A Benoit

Mailing Address 7144 South River Rd

City Addis | State LA | Zip Code 70710

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 17 / 2014

Amount
3.30

**Transaction ID : c1d4830c-639a-4c0a-b**

Date of Disbursement or Obligation
08 / 17 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 43.30

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379049

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Brogan A Benoit

Mailing Address 7144 South River Rd

City Addis | State LA | Zip Code 70710

Purpose of Expenditure
Salary

Category/Type 001

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
60.00

**Transaction ID : 14895b51-d613-4b09-b**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Brogan A Benoit

Mailing Address 7144 South River Rd

City Addis | State LA | Zip Code 70710

Purpose of Expenditure
Mileage

Category/Type 002

Date of Public Distribution/Dissemination
08 / 23 / 2014

Amount
9.60

**Transaction ID : c673c364-be5e-475f-a**

Date of Disbursement or Obligation
08 / 23 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 69.60

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379050

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nicholas O Wilcox

Mailing Address 1981 Cherokee St

City: Baton Rouge State: LA Zip Code: 70806

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 11 / 2014

Amount: 35.00

**Transaction ID : 0b59211e-dd49-4373-a**

Date of Disbursement or Obligation: 08 / 11 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nicholas O Wilcox

Mailing Address 1981 Cherokee St

City: Baton Rouge State: LA Zip Code: 70806

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 12 / 2014

Amount: 20.80

**Transaction ID : 3d6c08cc-3e70-4010-9**

Date of Disbursement or Obligation: 08 / 12 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 55.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379051

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nicholas O Wilcox

Mailing Address 1981 Cherokee St

City: Baton Rouge State: LA Zip Code: 70806

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 13 / 2014

Amount: 20.00

**Transaction ID : f20c4e88-9b35-41e8-a**

Date of Disbursement or Obligation: 08 / 13 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nicholas O Wilcox

Mailing Address 1981 Cherokee St

City: Baton Rouge State: LA Zip Code: 70806

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 15 / 2014

Amount: 30.50

**Transaction ID : 9f8b92d0-c5bc-4e53-a**

Date of Disbursement or Obligation: 08 / 15 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 50.50

**(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.

*Ms. Emily Buchanan*

*[Electronically Filed]*

Signature

Date 05 / 14 / 2015

Image# 15951379052

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nicholas O Wilcox

Mailing Address 1981 Cherokee St

City: Baton Rouge State: LA Zip Code: 70806

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 21 / 2014

Amount: 90.00

**Transaction ID : 73b6a03a-b10f-4b13-8**

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee
Nicholas O Wilcox

Mailing Address 1981 Cherokee St

City: Baton Rouge State: LA Zip Code: 70806

Purpose of Expenditure: Salary

Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 22 / 2014

Amount: 15.00

**Transaction ID : 980ad5ee-3937-4b61-8**

Date of Disbursement or Obligation: 08 / 22 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu

☐ Support ☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: 00 State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

**(a) SUBTOTAL** of Itemized Independent Expenditures ▶ 105.00

**(b) SUBTOTAL** of Unitemized Independent Expenditures ▶

**(c) TOTAL** Independent Expenditures ▶

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

*Ms. Emily Buchanan*

***[Electronically Filed]***

Signature

Date 05 / 14 / 2015

Image# 15951379053

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Nicholas O Wilcox

Mailing Address 1981 Cherokee St

City: Baton Rouge State: LA Zip Code: 70806

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 25 / 2014

Amount: 61.80

**Transaction ID : 157d0200-40ef-43a5-b**

Date of Disbursement or Obligation: 08 / 25 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee
Nicholas O Wilcox

Mailing Address 1981 Cherokee St

City: Baton Rouge State: LA Zip Code: 70806

Purpose of Expenditure: Salary
Category/Type: 001

Date of Public Distribution/Dissemination: 08 / 26 / 2014

Amount: 65.00

**Transaction ID : 10f62824-5f06-4197-b**

Date of Disbursement or Obligation: 08 / 26 / 2014

Name of Federal Candidate: Ms. Mary L Landrieu
☐ Support ☒ Oppose

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: LA

Calendar Year-To-Date Per Election for Office Sought 2014: 554635.78

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 126.80

(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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015

Image# 15951379054

# SCHEDULE E (FEC Form 3X)
## ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

FEC IDENTIFICATION NUMBER ▼
C C00530766

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Darius Beverly

Date of Public Distribution/Dissemination
08 / 16 / 2014

Mailing Address
157 Bishop Drive

Amount
75.00

City: Avondale
State: LA
Zip Code: 70094

**Transaction ID : 38a46c87-ddb1-4ec5-b**

Purpose of Expenditure
Salary

Category/Type: 001

Date of Disbursement or Obligation
08 / 16 / 2014

Name of Federal Candidate
Ms. Mary L Landrieu

☐ Support
☒ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: 00
State: LA

Calendar Year-To-Date Per Election for Office Sought 2014
554635.78

Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee

Date of Public Distribution/Dissemination
M M / D D / Y Y Y Y

Mailing Address

Amount

City
State
Zip Code

Purpose of Expenditure

Category/Type

Date of Disbursement or Obligation
M M / D D / Y Y Y Y

Name of Federal Candidate

☐ Support
☐ Oppose

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

Calendar Year-To-Date Per Election for Office Sought

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 75.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶ 143975.16

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.

*Ms. Emily Buchanan*
*[Electronically Filed]*
Signature

Date 05 / 14 / 2015