

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

DRAFT NEWT

ADDRESS (number and street) 717 KING STREET SUITE 300

Check if different than previously reported. (ACC) ALEXANDRIA VA 22314

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

C C00550772

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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on [MM] / [DD] / [YYYY] in the State of []

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [09] / [16] / [2013] through [12] / [31] / [2013]

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 Dan Backer

Signature of Treasurer Dan Backer [Electronically Filed] Date 01 / 30 / 2014

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

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

DRAFT NEWT

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="20426.28"/>	<input type="text" value="20426.28"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="20426.28"/>	<input type="text" value="20426.28"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="18521.86"/>	<input type="text" value="18521.86"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1904.42"/>	<input type="text" value="1904.42"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

DRAFT NEWT

Report Covering the Period: From: M M / D D / Y Y Y Y 09 / 16 / 2013 To: M M / D D / Y Y Y Y 12 / 31 / 2013

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	200.00	200.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	200.00	200.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	200.00	200.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	20226.28	20226.28
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	20426.28	20426.28
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	20426.28	20426.28

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	125.00	125.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	125.00	125.00
(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)).....	125.00	125.00
29. Other Disbursements	18271.86	18271.86
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	18521.86	18521.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18521.86	18521.86

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	200.00	200.00
34. Total Contribution Refunds (from Line 28(d))	125.00	125.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	75.00	75.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	0.00	0.00

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

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

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

NAME OF COMMITTEE (In Full)
DRAFT NEWT

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

Mailing Address 1761 SE 7th St

City Fort Luderdale State FL Zip Code 33316

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

Name of Employer none Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2013

Transaction ID : SA17.5197

Amount of Each Receipt this Period
500.00

Carey account contribution

B. RICHARD CONRAD
Full Name (Last, First, Middle Initial)

Mailing Address 9757 S. LEAVITT

City CHIGAGO State IL Zip Code 60643

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

Name of Employer ST PHILIP CHURCH Occupation PRIEST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2013

Transaction ID : SA17.4331

Amount of Each Receipt this Period
250.00

Carey account contribution

C. Richard Dicharry
Full Name (Last, First, Middle Initial)

Mailing Address 128 Island Drive

City Slidell State LA Zip Code 70458

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

Name of Employer Source Production & Equip Occupation Exec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 01 / 2013

Transaction ID : SA17.5074

Amount of Each Receipt this Period
250.00

Carey account contribution

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
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)	PAGE 7 OF 14
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DRAFT NEWT

Full Name (Last, First, Middle Initial)
A. eDonation

Mailing Address 117 North Saint Asaph Street

City Alexandria State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
382.95

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 13 / 2013
Transaction ID : SA17.4146

Amount of Each Receipt this Period
382.95

Carey receipt; list rental

Full Name (Last, First, Middle Initial)
B. eDonation

Mailing Address 117 North Saint Asaph Street

City Alexandria State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1085.85

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 10 / 2013
Transaction ID : SA17.4150

Amount of Each Receipt this Period
702.90

Carey receipt; list rental

Full Name (Last, First, Middle Initial)
C. EDWIN JENNINGS

Mailing Address 1212 Wood Hollow Dr
P.O. BOX 55487

City HOUSTON State TX Zip Code 77255

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

Name of Employer Occupation
retired engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2013
Transaction ID : SA17.4457

Amount of Each Receipt this Period
500.00

Carey account contribution

SUBTOTAL of Receipts This Page (optional).....▶	1585.85
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)	PAGE 8 OF 14
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DRAFT NEWT

Full Name (Last, First, Middle Initial) A. George G. Matthews		Date of Receipt MM / DD / YYYY 09 / 30 / 2013 Transaction ID : SA17.4994
Mailing Address 1925 N. Flagler Dr.		Amount of Each Receipt this Period 500.00
City W. Palm Beach	State FL	Zip Code 33407
FEC ID number of contributing federal political committee. C	Carey account contribution	
Name of Employer RETIRED	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. SCM Enterprises LLC		Date of Receipt MM / DD / YYYY 12 / 09 / 2013 Transaction ID : SA17.4152
Mailing Address 717 King Street Ste 300		Amount of Each Receipt this Period 274.47
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. C	Carey receipt; list rental	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 274.47	

Full Name (Last, First, Middle Initial) c. SCM Enterprises LLC		Date of Receipt MM / DD / YYYY 12 / 11 / 2013 Transaction ID : SA17.4154
Mailing Address 717 King Street Ste 300		Amount of Each Receipt this Period 33.12
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. C	Carey receipt; list rental	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.59	

SUBTOTAL of Receipts This Page (optional).....▶	807.59
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 14
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
DRAFT NEWT

Full Name (Last, First, Middle Initial)
A. SCM Enterprises LLC

Mailing Address 717 King Street
Ste 300

City Alexandria State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
343.43

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : SA17.4153

Amount of Each Receipt this Period
35.84

Carey receipt; list rental

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	35.84
TOTAL This Period (last page this line number only).....▶	3429.28

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DRAFT NEWT

Full Name (Last, First, Middle Initial) A. FRIENDS OF CONGRESSMAN STEVE STOCKMAN		Date of Disbursement MM / DD / YYYY 09 / 23 / 2013	
Mailing Address PO BOX 57135		Transaction ID : SB23.4112 Amount of Each Disbursement this Period 25.00	
City WEBSTER	State TX		Zip Code 77598
Purpose of Disbursement Candidate contribution			Category/ Type 011
Candidate Name STEVE STOCKMAN	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: TX	District: 00		

Full Name (Last, First, Middle Initial) B. JIM TRACY FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 23 / 2013	
Mailing Address PO BOX 332490		Transaction ID : SB23.4116 Amount of Each Disbursement this Period 25.00	
City MURFREESBORO	State TN		Zip Code 37133
Purpose of Disbursement Candidate contribution			Category/ Type 011
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: TN	District: 04		

Full Name (Last, First, Middle Initial) C. JOE CARR FOR SENATE		Date of Disbursement MM / DD / YYYY 09 / 23 / 2013	
Mailing Address PO BOX 192		Transaction ID : SB23.4118 Amount of Each Disbursement this Period 25.00	
City LASCASSAS	State TN		Zip Code 37085
Purpose of Disbursement Candidate contribution			Category/ Type 011
Candidate Name JOE S CARR	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: TN	District: 00		

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

75.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DRAFT NEWT

Full Name (Last, First, Middle Initial) A. KANSANS FOR HUELSKAMP		Date of Disbursement MM / DD / YYYY 09 / 23 / 2013	
Mailing Address PO BOX 410		Transaction ID : SB23.4114 Amount of Each Disbursement this Period 25.00	
City FOWLER	State KS		Zip Code 67844
Purpose of Disbursement Candidate contribution	Category/ Type 011		
Candidate Name TIMOTHY A REPRESENTA HUELSKAMP	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KS District: 01		

Full Name (Last, First, Middle Initial) B. PAUL BROUN COMMITTEE		Date of Disbursement MM / DD / YYYY 09 / 23 / 2013	
Mailing Address P.O. BOX 6337		Transaction ID : SB23.4110 Amount of Each Disbursement this Period 25.00	
City ATHENS	State GA		Zip Code 30604
Purpose of Disbursement Candidate contribution	Category/ Type 011		
Candidate Name PAUL COLLINS BROUN	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: GA District: 00		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address		Amount of Each Disbursement this Period	
City	State		Zip Code
Purpose of Disbursement	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	125.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DRAFT NEWT

Full Name (Last, First, Middle Initial)

A. Campaign Solutions

Mailing Address 117 North Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Carey account; online & email services

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2013

Transaction ID : SB29.4139

Amount of Each Disbursement this Period

4379.26

Full Name (Last, First, Middle Initial)

B. Campaign Solutions

Mailing Address 117 North Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Carey account; online & email services

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 09 / 2013

Transaction ID : SB29.4131

Amount of Each Disbursement this Period

2633.17

Full Name (Last, First, Middle Initial)

C. Campaign Solutions

Mailing Address 117 North Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Carey account; list rental fees

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 09 / 2013

Transaction ID : SB29.4142

Amount of Each Disbursement this Period

3075.75

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

10088.18

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
DRAFT NEWT

Full Name (Last, First, Middle Initial)

A. DB Capitol Strategies, PLLC

Mailing Address 717 King Street
Ste 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Carey account; legal and compliance consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.4120

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. DB Capitol Strategies, PLLC

Mailing Address 717 King Street
Ste 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Carey account; legal and compliance consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.4129

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Digital Acumen

Mailing Address 148 Long Lane

City East Hampton State NY Zip Code 11937

Purpose of Disbursement
Carey account; list rental fee; fundraising consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.4124

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DRAFT NEWT

Full Name (Last, First, Middle Initial)

A. eDonation

Mailing Address 117 North Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Carey account; transaction processing fees

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : SB29.4141

Amount of Each Disbursement this Period

1645.04

Full Name (Last, First, Middle Initial)

B. Political Media, Inc.

Mailing Address 406 1st Street, SE
3rd floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
Carey account; list rental fee

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2013

Transaction ID : SB29.4122

Amount of Each Disbursement this Period

551.25

Full Name (Last, First, Middle Initial)

C. Western Representation PAC

Mailing Address 717 King Street
Ste 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Carey account; list rental fees

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2013

Transaction ID : SB29.4126

Amount of Each Disbursement this Period

477.00

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

2673.29

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

18238.11