

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

| | | |
|--|--|--|
| 1. (a) Name of Individual, Organization or Corporation YG NETWORK INC. | | 3. FEC Identification Number C C90013038 |
| (b) Address (number and street) <input type="checkbox"/> check if different than previously reported 211 NORTH UNION STREET | | |
| (c) City, State and ZIP Code ALEXANDRIA VA 22314 | | |
| 2. Occupation and Name of Employer (for Individual Filers Only) | | |

4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report
- July 15 Quarterly Report 24-Hour Report
- October 15 Quarterly Report 48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment? No Yes, it amends the report filed on / /

5. COVERING PERIOD:
 FROM / /
 THROUGH / /

6. TOTAL CONTRIBUTIONS..... 0.00

7. TOTAL INDEPENDENT EXPENDITURES 80996.00

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

| | | |
|---|---|-------------|
| TYPE OR PRINT NAME OF PERSON COMPLETING FORM | SIGNATURE | DATE |
| MARY ANNE CARTER | MARY ANNE CARTER <i>[Electronically Filed]</i> | 07/15/2014 |

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

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

Form/Schedule: F5N
Transaction ID :

This report is complete as filed. YG Network had no contributions requiring disclosure during this reporting period.

Form/Schedule:
Transaction ID:

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
YG NETWORK INC.

| | | | |
|--|----------------------|--|---------------------------|
| Full Name (Last, First, Middle Initial) of Payee CREATIVE DIRECT LLC | | Date of Public Distribution/Dissemination 04 / 23 / 2014 | |
| Mailing Address 25 E. MAIN ST. | | Amount 14820.00 | |
| City RICHMOND | State VA | Zip Code 23219 | Transaction ID : F57.4362 |
| Purpose of Expenditure MAILER | Category/Type 004 | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: NC District: 07 |
| Name of Federal Candidate Supported or Opposed by Expenditure: Mr. DAVID CHESTON ROUZER | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 14820.00 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | | |
|--|----------------------|--|---------------------------|
| Full Name (Last, First, Middle Initial) of Payee CREATIVE DIRECT LLC | | Date of Public Distribution/Dissemination 04 / 24 / 2014 | |
| Mailing Address 25 E. MAIN ST. | | Amount 14820.00 | |
| City RICHMOND | State VA | Zip Code 23219 | Transaction ID : F57.4366 |
| Purpose of Expenditure MAILER | Category/Type 004 | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: NC District: 07 |
| Name of Federal Candidate Supported or Opposed by Expenditure: Mr. DAVID CHESTON ROUZER | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 29640.00 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | | |
|---|----------------------|--|---------------------------|
| Full Name (Last, First, Middle Initial) of Payee CREATIVE DIRECT LLC | | Date of Public Distribution/Dissemination 04 / 28 / 2014 | |
| Mailing Address 25 E. MAIN ST. | | Amount 24130.00 | |
| City RICHMOND | State VA | Zip Code 23219 | Transaction ID : F57.4371 |
| Purpose of Expenditure MAILER | Category/Type 004 | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: NC District: 07 |
| Name of Federal Candidate Supported or Opposed by Expenditure: HAYWOOD EDWIN WHITE III | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 53770.00 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | |
|---|----------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 53770.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| (c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7) | |

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
YG NETWORK INC.

| | | | |
|---|----------------------|--|---------------------------|
| Full Name (Last, First, Middle Initial) of Payee CREATIVE DIRECT LLC | | Date of Public Distribution/Dissemination 04 / 30 / 2014 | |
| Mailing Address 25 E. MAIN ST. | | Amount 24130.00 | |
| City RICHMOND | State VA | Zip Code 23219 | Transaction ID : F57.4375 |
| Purpose of Expenditure MAILER | Category/Type 004 | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: NC District: 07 |
| Name of Federal Candidate Supported or Opposed by Expenditure: HAYWOOD EDWIN WHITE III | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 77900.00 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

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|---|----------------------|--|---------------------------|
| Full Name (Last, First, Middle Initial) of Payee ELECTION CONNECTIONS, INC. | | Date of Public Distribution/Dissemination 05 / 01 / 2014 | |
| Mailing Address PO BOX 10866 | | Amount 1048.60 | |
| City TALLAHASSEE | State FL | Zip Code 32302 | Transaction ID : F57.4378 |
| Purpose of Expenditure PHONE CALLS | Category/Type 004 | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: NC District: 07 |
| Name of Federal Candidate Supported or Opposed by Expenditure: HAYWOOD EDWIN WHITE III | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 78948.60 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

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|---|----------------------|--|---------------------------|
| Full Name (Last, First, Middle Initial) of Payee ELECTION CONNECTIONS, INC. | | Date of Public Distribution/Dissemination 05 / 03 / 2014 | |
| Mailing Address PO BOX 10866 | | Amount 1033.96 | |
| City TALLAHASSEE | State FL | Zip Code 32302 | Transaction ID : F57.4382 |
| Purpose of Expenditure PHONE CALLS | Category/Type 004 | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: NC District: 07 |
| Name of Federal Candidate Supported or Opposed by Expenditure: HAYWOOD EDWIN WHITE III | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 79982.56 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

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|---|----------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 26212.56 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| (c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7) | |

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
YG NETWORK INC.

| | | | |
|---|-------------|--|--|
| Full Name (Last, First, Middle Initial) of Payee ELECTION CONNECTIONS, INC. | | Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 05 / 2014 | |
| Mailing Address PO BOX 10866 | | Amount 1013.44 | |
| City TALLAHASSEE | State FL | Zip Code 32302 | |
| Purpose of Expenditure PHONE CALLS | | Category/ Type 004 | Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: HAYWOOD EDWIN WHITE III | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 80996.00 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ | |

Transaction ID : F57.4385

| | | | |
|--|-------|---|---|
| Full Name (Last, First, Middle Initial) of Payee | | Date of Public Distribution/Dissemination | |
| Mailing Address | | Amount | |
| City | State | Zip Code | |
| Purpose of Expenditure | | Category/ Type | Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: | | Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ | |

| | | | |
|--|-------|---|---|
| Full Name (Last, First, Middle Initial) of Payee | | Date of Public Distribution/Dissemination | |
| Mailing Address | | Amount | |
| City | State | Zip Code | |
| Purpose of Expenditure | | Category/ Type | Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: | | Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ | |

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|--|----------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 1013.44 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| (c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7) | 80996.00 |