

**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

BLUE DOG POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

6849 Old Dominion Drive

Suite 222

McLean

VA

22101

☐ Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00305318

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☒ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

01

01

2014

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

01

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 Leslie J. Kerman

Signature of Treasurer

Leslie J. Kerman

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

02

04

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**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

BLUE DOG POLITICAL ACTION COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2014 To: M M / D D / Y Y Y Y 01 / 31 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y 2014		437147.03
(b) Cash on Hand at Beginning of Reporting Period.....	437147.03	
(c) Total Receipts (from Line 19)	61964.09	61964.09
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	499111.12	499111.12
7. Total Disbursements (from Line 31)	19904.06	19904.06
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	479207.06	479207.06
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)

Page 3

Write or Type Committee Name

BLUE DOG POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

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

To:

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

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	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	61950.00	61950.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ►	61950.00	61950.00
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.).....	14.09	14.09
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))..... ►	61964.09	61964.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ►	61964.09	61964.09

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	19904.06	19904.06
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	19904.06	19904.06
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	19904.06	19904.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19904.06	19904.06

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)	61950.00	61950.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	61950.00	61950.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	19904.06	19904.06
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	19904.06	19904.06

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 12

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUE DOG POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. AMERICAN MARITIME OFFICERS VOLUNTARY POLITICAL ACTION FUND

Mailing Address PO BOX 66

City State Zip Code
DANIA BEACH FL 33004

FEC ID number of contributing
federal political committee.

C C00027532

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

01 / **24** / **2014**

Transaction ID : SA11C.12428

Amount of Each Receipt this Period

5000.00

Contribution

B. AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)

Mailing Address 1111 North Fairfax St.

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing
federal political committee.

C C00012880

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

01 / **31** / **2014**

Transaction ID : SA11C.12424

Amount of Each Receipt this Period

3500.00

Contribution

C. AMERICAN PSYCHOLOGICAL ASSOCIATION PRACTICE ORGANIZATION POLITICAL ACTION COMMITTEE (APAPO)

Mailing Address PO BOX 65353

City State Zip Code
WASHINGTON DC 20035

FEC ID number of contributing
federal political committee.

C C00522094

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / **31** / **2014**

Transaction ID : SA11C.12415

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

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

9500.00

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)

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NAME OF COMMITTEE (In Full)

BLUE DOG POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. AMGEN INC. POLITICAL ACTION COMMITTEE

Mailing Address 555 13th Street
Suite 600 West

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C C00251876

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

01 / **24** / **2014**

Transaction ID : SA11C.12432

Amount of Each Receipt this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

B. CREDIT UNION LEGISLATIVE ACTION COUNCIL OF CUNA

Mailing Address 601 Pennsylvania Avenue NW
South Building Suite 600B

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C C00007880

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

01 / **31** / **2014**

Transaction ID : SA11C.12423

Amount of Each Receipt this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

C. ELECTRICAL CONSTRUCTION PAC-NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION, INC (ECPAC)

Mailing Address 3 BETHESDA METRO CENTER SUITE 1100

City BETHESDA State MD Zip Code 20814

FEC ID number of contributing
federal political committee.

C C00113811

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

01 / **31** / **2014**

Transaction ID : SA11C.12420

Amount of Each Receipt this Period

5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

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

15000.00

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

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

FOR LINE NUMBER: PAGE 8 OF 12
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

BLUE DOG POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address One Thomas Circle NW
Suite 400

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee.

C C00032698

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

01 / **24** / **2014**

Transaction ID : SA11C.12430

Amount of Each Receipt this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

B. INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

Mailing Address 1501 K STREET NW

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing
federal political committee.

C C00084491

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

01 / **31** / **2014**

Transaction ID : SA11C.12419

Amount of Each Receipt this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

C. INTERNATIONAL PAPER POLITICAL ACTION COMMITTEE

Mailing Address 1101 Pennsylvania Avenue NW
Suite 200

City State Zip Code
Washington DC 20004

FEC ID number of contributing
federal political committee.

C C00034405

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

01 / **31** / **2014**

Transaction ID : SA11C.12413

Amount of Each Receipt this Period

5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

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

15000.00

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 9 OF 12

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NAME OF COMMITTEE (In Full)

BLUE DOG POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MARATHON PETROLEUM CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE (MPAC)

Mailing Address P.O. BOX 75000
MC2250

City State Zip Code
DETROIT MI 48275

FEC ID number of contributing
federal political committee.

C C00496307

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

01 / **30** / **2014**

Transaction ID : SA11C.12414

Amount of Each Receipt this Period

5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF FEDERAL CREDIT UNIONS POLITICAL ACTION COMMITTEE (NAFCUPAC)

Mailing Address 3138 N 10TH ST

City State Zip Code
ARLINGTON VA 22201

FEC ID number of contributing
federal political committee.

C C00040659

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

01 / **31** / **2014**

Transaction ID : SA11C.12422

Amount of Each Receipt this Period

2500.00

Contribution

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Mailing Address 1212 New York Ave., N.W.
Suite 1100

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee.

C C00283135

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

01 / **31** / **2014**

Transaction ID : SA11C.12425

Amount of Each Receipt this Period

5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

12500.00

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 10 OF 12

☐ 11a ☐ 11b ☒ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

BLUE DOG POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. NRA POLITICAL VICTORY FUND

Mailing Address 11250 WAPLES MILL ROAD

City State Zip Code
 FAIRFAX VA 22030

FEC ID number of contributing
federal political committee.

C C00053553

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4950.00

Date of Receipt

01 / 31 / 2014

Transaction ID : SA11C.12421

Amount of Each Receipt this Period

4950.00

Contribution

Full Name (Last, First, Middle Initial)

B. UNITED PARCEL SERVICE INC. POLITICAL ACTION COMMITTEE

Mailing Address 55 Glenlake Parkway N.E.

City State Zip Code
 Atlanta GA 30328

FEC ID number of contributing
federal political committee.

C C00064766

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

01 / 31 / 2014

Transaction ID : SA11C.12416

Amount of Each Receipt this Period

5000.00

Contribution

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

9950.00

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

61950.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 12

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

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NAME OF COMMITTEE (In Full)

BLUE DOG POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 36001

City	State	Zip Code
Fort Lauderdale	FL	33336

Purpose of Disbursement
See Memo Below.

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		20		2014

Transaction ID : SB21B.12436

Amount of Each Disbursement this Period

348.40

Full Name (Last, First, Middle Initial)

B. Tortilla Coast

Mailing Address 400 First St., SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
PAC Meeting: Catering

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		08		2014

Transaction ID : SB21B.12436.0

Amount of Each Disbursement this Period

348.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Molly Allen Associates

Mailing Address 10402 Parkwood Drive

City	State	Zip Code
Kensington	MD	20895

Purpose of Disbursement
PAC Fundraising: Fees and Expenses

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		02		2014

Transaction ID : SB21B.12435

Amount of Each Disbursement this Period

14501.15

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

14849.55

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 12

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

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NAME OF COMMITTEE (In Full)

BLUE DOG POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. The Waverly Group, Inc.

Mailing Address 6849 Old Dominion Drive, Suite 222

City	State	Zip Code
McLean	VA	22101

Purpose of Disbursement
PAC Mang't./Compliance: Fees and Expenses

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		02		2014

Transaction ID : SB21B.12434

Amount of Each Disbursement this Period

5050.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

5050.00

19899.55
