



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value=""/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="16480.81"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="121861.00"/>	<input type="text" value="269361.37"/>
(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="138341.81"/>	<input type="text" value="269361.37"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="90941.92"/>	<input type="text" value="221961.48"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="47399.89"/>	<input type="text" value="47399.89"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="167000.00"/>	

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

**GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	94300.00	101800.00
(ii) Unitemized .....	531.00	531.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	94831.00	102331.00
(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) .....	94831.00	102331.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	27000.00	167000.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	30.00	30.37
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	121861.00	269361.37
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	121861.00	269361.37

**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 .....	-79606.17	51413.39
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	-79606.17	51413.39
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) .....	170548.09	170548.09
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)) ..	90941.92	221961.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	90941.92	221961.48

**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) .....	94831.00	102331.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	94831.00	102331.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	-79606.17	51413.39
37. Offsets to Operating Expenditures (from Line 15, page 3).....	30.00	30.37
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	-79636.17	51383.02

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

Form/Schedule: F3XA  
Transaction ID :

This amended report reflects small online donations and associated processing charges that were inadvertently omitted from the original report. Receipts are increased by \$431 and disbursements by \$21.55

Form/Schedule:  
Transaction ID:

**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 29
<input checked="" 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 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)  
**GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')**

**A. Clements T Berezoski**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19600 Smith Cir  
 City Ashburn State VA Zip Code 20147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Potomac Corporation of VA Occupation Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2014  
**Transaction ID : SA11AI.4200**  
 Amount of Each Receipt this Period  
 5000.00

**B. Gordon R England**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 30 Windward Rd  
 City Fort Worth State TX Zip Code 76132  
 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 ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2014  
**Transaction ID : SA11AI.4214**  
 Amount of Each Receipt this Period  
 5000.00

**C. Herbert London Inc**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 West St 20E  
 City New York State NY Zip Code 10004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 11 / 2014  
**Transaction ID : SA11AI.4218**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10300.00
<b>TOTAL</b> 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 29
<input checked="" 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 type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')**

Full Name (Last, First, Middle Initial) <b>A. Thomas Holmes Jr</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2014
Mailing Address 1137 Selwood Dr		<b>Transaction ID : SA11AI.4198</b>
City Virginia Beach	State VA	Zip Code 23464
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00	
Name of Employer Holmes Properies LP	Occupation Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>B. Johanson Ventures, Inc</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2014
Mailing Address 1519 Bledsoe St		<b>Transaction ID : SA11AI.4202</b>
City Sylmar	State CA	Zip Code 91342
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10000.00	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) <b>c. Latshaw Drilling Company, LLC</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2014
Mailing Address PO Box 691017		<b>Transaction ID : SA11AI.4212</b>
City Tulsa	State OK	Zip Code 74169
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 15000.00	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	27500.00
<b>TOTAL</b> 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 9 OF 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')**

**A. M G Robertson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address c/o Mrs. G. G. Conklin, PA  
 977 Centerville Tpk SHB-301  
 City Virginia Beach State VA Zip Code 23463  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Christian Broadcasting Network Occupation Chairman  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **5000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 29 / 2014  
**Transaction ID : SA11AI.4194**  
 Amount of Each Receipt this Period  
**5000.00**

**B. Virginia A Sniegion**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5901 Mount Eagle Dr  
 Apt 1402  
 City Alexandria State VA Zip Code 22303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer IDA Occupation Analyst  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2014  
**Transaction ID : SA11AI.4208**  
 Amount of Each Receipt this Period  
**1000.00**

**C. Suzanne Spikes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6150 Sunpattersn Trl  
 City Fairfax Station State VA Zip Code 22039  
 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 / 24 / 2014  
**Transaction ID : SA11AI.4196**  
 Amount of Each Receipt this Period  
**500.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>6500.00</b>
<b>TOTAL</b> 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 10 OF 29  
(check only one)

<input checked="" 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 type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. John M Templeton Jr.**

Mailing Address 601 Pembroke Rd

City State Zip Code  
Bryn Mawr PA 19010

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

Name of Employer Occupation  
John Templeton Foundation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2014

**Transaction ID : SA11AI.4216**

Amount of Each Receipt this Period  
50000.00

**B.** 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 Y Y

Amount of Each Receipt this Period

**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 Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	94300.00

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

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

FOR LINE NUMBER: PAGE 11 OF 29  
(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 type="checkbox"/> 17
<input checked="" type="checkbox"/> 13								

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NAME OF COMMITTEE (In Full)  
**GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')**

**A.** Full Name (Last, First, Middle Initial)  
**James S. Gilmore III**

Mailing Address 8105 Spencely Pl

City Richmond State VA Zip Code 23229

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

Name of Employer Free Congress Foundation Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
167000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 23 / 2014

**Transaction ID : SA13.4167**

Amount of Each Receipt this Period  
 27000.00

Loan

**B.** 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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	27000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	27000.00

**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 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)  
**GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')**

Full Name (Last, First, Middle Initial)

**A. Capital City Partners**

Mailing Address 1100 G St NW  
Suite 840

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 13 / 2014

**Transaction ID : SB21B.4223**

Amount of Each Disbursement this Period

8500.00

Full Name (Last, First, Middle Initial)

**B. Edmond Associates, Inc.**

Mailing Address PO Box 2607

City Leesburg State VA Zip Code 20177

Purpose of Disbursement  
Debit Pre-Paid IE from 12G; See IEs on Sch. D

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2014

**Transaction ID : SB21B.4128**

Amount of Each Disbursement this Period

-117447.00

Full Name (Last, First, Middle Initial)

**C. Edmond Associates, Inc.**

Mailing Address PO Box 2607

City Leesburg State VA Zip Code 20177

Purpose of Disbursement  
Advertising - Production

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 24 / 2014

**Transaction ID : SB21B.4155**

Amount of Each Disbursement this Period

3200.00

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

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

-105747.00

**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 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)  
**GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')**

Full Name (Last, First, Middle Initial)

**A. Edmond Associates, Inc.**

Mailing Address PO Box 2607

City Leesburg State VA Zip Code 20177

Purpose of Disbursement  
Pre-Paid IE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2014

**Transaction ID : SB21B.4233**

Amount of Each Disbursement this Period

240.00
--------

Full Name (Last, First, Middle Initial)

**B. Edmond Associates, Inc.**

Mailing Address PO Box 2607

City Leesburg State VA Zip Code 20177

Purpose of Disbursement  
Debit Pre-Paid IE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2014

**Transaction ID : SB21B.4234**

Amount of Each Disbursement this Period

-240.00
---------

Full Name (Last, First, Middle Initial)

**C. Edmond Associates, Inc.**

Mailing Address PO Box 2607

City Leesburg State VA Zip Code 20177

Purpose of Disbursement  
Advertising Consultant Expense Reimbursements

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		13		2014

**Transaction ID : SB21B.4235**

Amount of Each Disbursement this Period

1767.18
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

1767.18
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')**

Full Name (Last, First, Middle Initial)

**A. Courtney Herron**

Mailing Address 1100 G St NW  
Suite 840

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Reimbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2014			

**Transaction ID : SB21B.4224**

Amount of Each Disbursement this Period

923.44
--------

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Executive Press, Inc.**

Mailing Address 10412 Main St

City Fairfax State VA Zip Code 22030

Purpose of Disbursement  
Printing/Postage

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2014			

**Transaction ID : SB21B.4224.0**

Amount of Each Disbursement this Period

923.44
--------

Category/  
Type

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Political Media, Inc.**

Mailing Address 406 First St SE  
FI 3

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Online Strategy

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			24			2014			

**Transaction ID : SB21B.4206**

Amount of Each Disbursement this Period

9074.56
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Category/  
Type

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

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

9998.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')**

Full Name (Last, First, Middle Initial)

**A. Thomas A Readmond**

Mailing Address 2070 Hungting Creek Ct

City Alexandria State VA Zip Code 22303

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 13 / 2014

**Transaction ID : SB21B.4228**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Thomas A Readmond**

Mailing Address 2070 Hungting Creek Ct

City Alexandria State VA Zip Code 22303

Purpose of Disbursement  
Rembursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 13 / 2014

**Transaction ID : SB21B.4230**

Amount of Each Disbursement this Period

200.15

Full Name (Last, First, Middle Initial)

**C. Omni Hotels & Resorts**

Mailing Address 4001 Maple Ave

City Dallas State TX Zip Code 75219

Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 13 / 2014

**Transaction ID : SB21B.4230.0**

Amount of Each Disbursement this Period

200.15

**[MEMO ITEM]**

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

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

5200.15

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')**

Full Name (Last, First, Middle Initial)

### A. Shirley & Banister Public Affairs

Mailing Address 122 S Patrick St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Communications Consulting; Consultant Expenses

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2014			

Transaction ID : SB21B.4226

Amount of Each Disbursement this Period

9123.95
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Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

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)..... ▶

9123.95
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-79657.72
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**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')** Transaction ID : **SC/10.4144**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) James S. Gilmore III	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 8105 Spencely PI	
City Richmond State VA ZIP Code 23229	

Original Amount of Loan 39500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 39500.00
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**TERMS**

Date Incurred: M M / D D / Y Y Y Y Y Y  /  /

Date Due: M M / D D / Y Y Y Y Y Y  /  /

Interest Rate:  % (apr)

Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="39500.00"/>
<b>TOTALS</b> This Period (last page in this line only)..... ▶	<input type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')** Transaction ID : **SC/10.4145**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) James S. Gilmore III	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 8105 Spencely PI	
City Richmond State VA ZIP Code 23229	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
58500.00	0.00	58500.00

**TERMS**

Date Incurred: MM / DD / YYYY (10 / 14 / 2014)      Date Due: MM / DD / YYYY (12/31/2015)      Interest Rate: 0.00 % (apr)      Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	58500.00
<b>TOTALS</b> This Period (last page in this line only)..... ▶	[ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')** Transaction ID : **SC/10.4146**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) James S. Gilmore III	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 8105 Spencely PI	
City Richmond State VA ZIP Code 23229	

Original Amount of Loan 42000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 42000.00
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**TERMS**

Date Incurred: M M / D D / Y Y Y Y Y Y  /  /

Date Due: M M / D D / Y Y Y Y Y Y  /  /

Interest Rate:  % (apr)

Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="42000.00"/>
<b>TOTALS</b> This Period (last page in this line only)..... ▶	<input type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')** Transaction ID : **SC/10.4167**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) James S. Gilmore III	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 8105 Spencely PI	
City Richmond State VA ZIP Code 23229	

Original Amount of Loan 27000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 27000.00
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**TERMS**

Date Incurred: M M / D D / Y Y Y Y Y Y

Date Due: M M / D D / Y Y Y Y Y Y

Interest Rate:  % (apr)

Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="27000.00"/>
<b>TOTALS</b> This Period (last page in this line only)..... ▶	<input type="text" value="167000.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')
FEC IDENTIFICATION NUMBER
C C00568840
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Edmond Associates, Inc.
Mailing Address PO Box 2607
City Leesburg State VA Zip Code 20177
Purpose of Expenditure Advertising - TV
Name of Federal Candidate EDWARD W GILLESPIE
Support
Calendar Year-To-Date Per Election for Office Sought 51757.00

Date of Public Distribution/Dissemination 10/20/2014
Amount 51757.00
Transaction ID : SE.4129
Date of Disbursement or Obligation 10/20/2014
Office Sought: Senate State: VA
Disbursement For: General 2014

Full Name of Payee
Edmond Associates, Inc.
Mailing Address PO Box 2607
City Leesburg State VA Zip Code 20177
Purpose of Expenditure Advertising - Radio
Name of Federal Candidate EDWARD W GILLESPIE
Support
Calendar Year-To-Date Per Election for Office Sought 85857.00

Date of Public Distribution/Dissemination 10/20/2014
Amount 34100.00
Transaction ID : SE.4131
Date of Disbursement or Obligation 10/20/2014
Office Sought: Senate State: VA
Disbursement For: General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 85857.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Chris Marston
[Electronically Filed]
Date 01/29/2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')
FEC IDENTIFICATION NUMBER
C C00568840
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Edmond Associates, Inc.
Mailing Address PO Box 2607
City Leesburg State VA Zip Code 20177
Purpose of Expenditure Advertising - Radio
Name of Federal Candidate SCOTT BROWN
Calendar Year-To-Date Per Election for Office Sought 15300.00

Date of Public Distribution/Dissemination 10 / 20 / 2014
Amount 15300.00
Transaction ID : SE.4132
Date of Disbursement or Obligation 10 / 20 / 2014
Office Sought: House District: 00
Senate State: NH
Disbursement For: Primary General 2014

Full Name of Payee
Edmond Associates, Inc.
Mailing Address PO Box 2607
City Leesburg State VA Zip Code 20177
Purpose of Expenditure Advertising - Radio
Name of Federal Candidate JONI K ERNST
Calendar Year-To-Date Per Election for Office Sought 16560.00

Date of Public Distribution/Dissemination 10 / 20 / 2014
Amount 16560.00
Transaction ID : SE.4134
Date of Disbursement or Obligation 10 / 20 / 2014
Office Sought: House District: 00
Senate State: IA
Disbursement For: Primary General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 31860.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Chris Marston [Electronically Filed] Date 01 / 29 / 2015
Signature

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

NAME OF COMMITTEE (In Full) <b>GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00568840
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Edmond Associates, Inc.</b>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 22 / 2014</b>
Mailing Address PO Box 2607	Amount <span style="float:right">9100.00</span>
City State Zip Code <b>Leesburg VA 20177</b>	<b>Transaction ID : SE.4152</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 24 / 2014</b>
Purpose of Expenditure Advertising - Production	Category/Type <span style="float:right">[ ]</span>
Name of Federal Candidate <b>EDWARD W GILLESPIE</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____ District: <u>00</u> State: <u>VA</u>
Calendar Year-To-Date Per Election for Office Sought <span style="float:right">94957.00</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) _____

Full Name of Payee <b>Edmond Associates, Inc.</b>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 22 / 2014</b>
Mailing Address PO Box 2607	Amount <span style="float:right">2300.00</span>
City State Zip Code <b>Leesburg VA 20177</b>	<b>Transaction ID : SE.4156</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 24 / 2014</b>
Purpose of Expenditure Advertising - Radio - Production	Category/Type <span style="float:right">[ ]</span>
Name of Federal Candidate <b>EDWARD W GILLESPIE</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____ District: <u>00</u> State: <u>VA</u>
Calendar Year-To-Date Per Election for Office Sought <span style="float:right">97257.00</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="float:right">11400.00</span>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="float:right">[ ]</span>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<span style="float:right">[ ]</span>

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

*Chris Marston*  
Signature

[Electronically Filed]

Date M M M / D D D / Y Y Y Y Y Y  
**01 / 29 / 2015**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')
FEC IDENTIFICATION NUMBER
C C00568840
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Edmond Associates, Inc.
Mailing Address PO Box 2607
City Leesburg State VA Zip Code 20177
Purpose of Expenditure Advertising - Radio - Production
Name of Federal Candidate SCOTT BROWN
Calendar Year-To-Date Per Election for Office Sought 17600.00

Date of Public Distribution/Dissemination 10 / 22 / 2014
Amount 2300.00
Transaction ID : SE.4157
Date of Disbursement or Obligation 10 / 24 / 2014
Office Sought: House District: 00
Senate State: NH
Disbursement For: Primary General 2014

Full Name of Payee
Edmond Associates, Inc.
Mailing Address PO Box 2607
City Leesburg State VA Zip Code 20177
Purpose of Expenditure Advertising - Radio - Production
Name of Federal Candidate JONI K ERNST
Calendar Year-To-Date Per Election for Office Sought 18860.00

Date of Public Distribution/Dissemination 10 / 22 / 2014
Amount 2300.00
Transaction ID : SE.4158
Date of Disbursement or Obligation 10 / 24 / 2014
Office Sought: House District: 00
Senate State: IA
Disbursement For: Primary General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 4600.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Chris Marston [Electronically Filed] Date 01 / 29 / 2015
Signature

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

NAME OF COMMITTEE (In Full) <b>GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00568840
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Edmond Associates, Inc.</b>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 28 / 2014</b>
Mailing Address <b>PO Box 2607</b>	Amount <span style="float:right">3700.00</span>
City <b>Leesburg</b> State <b>VA</b> Zip Code <b>20177</b>	<b>Transaction ID : SE.4170</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 24 / 2014</b>
Purpose of Expenditure <b>Advertising - Production</b> Category/Type <span style="float:right">[ ]</span>	Name of Federal Candidate <b>SCOTT BROWN</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought <span style="float:right">[ ]</span> <b>21300.00</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Edmond Associates, Inc.</b>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 28 / 2014</b>
Mailing Address <b>PO Box 2607</b>	Amount <span style="float:right">3700.00</span>
City <b>Leesburg</b> State <b>VA</b> Zip Code <b>20177</b>	<b>Transaction ID : SE.4171</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 24 / 2014</b>
Purpose of Expenditure <b>Advertising - Production</b> Category/Type <span style="float:right">[ ]</span>	Name of Federal Candidate <b>JONI K ERNST</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought <span style="float:right">[ ]</span> <b>22560.00</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="float:right">[ ]</span> <b>7400.00</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="float:right">[ ]</span>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<span style="float:right">[ ]</span>

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

*Chris Marston* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**01 / 29 / 2015**

Signature \_\_\_\_\_

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')
FEC IDENTIFICATION NUMBER
C C00568840
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Edmond Associates, Inc.
Mailing Address PO Box 2607
City Leesburg State VA Zip Code 20177
Purpose of Expenditure Advertising - TV
Name of Federal Candidate JONI K ERNST
Calendar Year-To-Date Per Election for Office Sought 31041.89

Date of Public Distribution/Dissemination
10 / 28 / 2014
Amount
8481.89
Transaction ID : SE.4168
Date of Disbursement or Obligation
10 / 30 / 2014
Office Sought: House District: 00
Senate State: IA
Disbursement For: Primary General 2014

Full Name of Payee
Edmond Associates, Inc.
Mailing Address PO Box 2607
City Leesburg State VA Zip Code 20177
Purpose of Expenditure Advertising - TV
Name of Federal Candidate SCOTT BROWN
Calendar Year-To-Date Per Election for Office Sought 31288.45

Date of Public Distribution/Dissemination
10 / 28 / 2014
Amount
9988.45
Transaction ID : SE.4169
Date of Disbursement or Obligation
10 / 30 / 2014
Office Sought: House District: 00
Senate State: NH
Disbursement For: Primary General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 18470.34
(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.

Chris Marston
[Electronically Filed]
Date 01 / 29 / 2015
Signature

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

NAME OF COMMITTEE (In Full) <b>GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00568840
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Edmond Associates, Inc.</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 31 / 2014</b>
Mailing Address PO Box 2607	Amount <b>760.00</b>
City Leesburg	State VA
Zip Code 20177	<b>Transaction ID : SE.4184</b>
Purpose of Expenditure Advertising - TV - Production	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 30 / 2014</b>
Name of Federal Candidate SCOTT BROWN	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
<b>32048.45</b>	

Full Name of Payee <b>Edmond Associates, Inc.</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 31 / 2014</b>
Mailing Address PO Box 2607	Amount <b>2033.00</b>
City Leesburg	State VA
Zip Code 20177	<b>Transaction ID : SE.4185</b>
Purpose of Expenditure Advertising - TV	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 30 / 2014</b>
Name of Federal Candidate SCOTT BROWN	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
<b>34081.45</b>	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>2793.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

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

*Chris Marston*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY  
**01 / 29 / 2015**

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

NAME OF COMMITTEE (In Full) <b>GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00568840
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Edmond Associates, Inc.</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 31 / 2014</b>
Mailing Address <b>PO Box 2607</b>	Amount <span style="margin-left: 20px;">5000.00</span>
City <b>Leesburg</b> State <b>VA</b> Zip Code <b>20177</b>	<b>Transaction ID : SE.4189</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 30 / 2014</b>
Purpose of Expenditure <b>Advertising - TV</b> Category/Type <span style="margin-left: 20px;">[ ]</span>	Name of Federal Candidate <b>JONI K ERNST</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">36041.89</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Edmond Associates, Inc.</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 31 / 2014</b>
Mailing Address <b>PO Box 2607</b>	Amount <span style="margin-left: 20px;">680.00</span>
City <b>Leesburg</b> State <b>VA</b> Zip Code <b>20177</b>	<b>Transaction ID : SE.4190</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 30 / 2014</b>
Purpose of Expenditure <b>Advertising - TV - Production</b> Category/Type <span style="margin-left: 20px;">[ ]</span>	Name of Federal Candidate <b>JONI K ERNST</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">36721.89</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="margin-left: 20px;">5680.00</span>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="margin-left: 20px;">[ ]</span>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<span style="margin-left: 20px;">[ ]</span>

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

*Chris Marston* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**01 / 29 / 2015**

Signature

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

NAME OF COMMITTEE (In Full) <b>GROWTH POLITICAL ACTION COMMITTEE ('GROWTH PAC')</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00568840
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Edmond Associates, Inc.</b>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 30 / 2014</b>
Mailing Address PO Box 2607	Amount <span style="float:right">2487.75</span>
City State Zip Code <b>Leesburg VA 20177</b>	
Purpose of Expenditure Advertising - Radio	Category/Type <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 31 / 2014</b>
Name of Federal Candidate <b>THOM R TILLIS</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought <span style="float:right">2487.75</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>
Mailing Address	Amount <span style="float:right">2487.75</span>
City State Zip Code	
Purpose of Expenditure	Category/Type <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>
Name of Federal Candidate	<input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="float:right">2487.75</span>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="float:right">2487.75</span>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<span style="float:right">170548.09</span>

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

*Chris Marston*  
Signature

[Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**01 / 29 / 2015**