

# 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  
**Fearless PAC**

ADDRESS (number and street) PO Box 37  
 Check if different than previously reported. (ACC) Boulder CO 80306

2. **FEC IDENTIFICATION NUMBER ▼** C00540955 **CITY ▲** **STATE ▲** **ZIP CODE ▲**  
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)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M / D D / 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 / D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y Y Y 01 / 01 / 2014 through M M / D D / Y Y Y Y Y Y 03 / 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 Amy Pritchard

Signature of Treasurer Amy Pritchard *[Electronically Filed]* Date M M / D D / Y Y Y Y Y Y 04 / 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.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Fearless 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="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="48641.51"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="78832.00"/>	<input type="text" value="78832.00"/>
(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="127473.51"/>	<input type="text" value="78832.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="59763.93"/>	<input type="text" value="59763.93"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="67709.58"/>	<input type="text" value="19068.07"/>
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="0.00"/>	

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

**For further information contact:**

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

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

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Fearless PAC**

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 03 / 31 / 2014

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	832.00	832.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	832.00	832.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	78000.00	78000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	78832.00	78832.00
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.).....	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))..... ▶	78832.00	78832.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	78832.00	78832.00

**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 .....	46763.93	46763.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	46763.93	46763.93
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12000.00	12000.00
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).....	1000.00	1000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	1000.00	1000.00
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)) ..	59763.93	59763.93
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	59763.93	59763.93

**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) .....	78832.00	78832.00
34. Total Contribution Refunds (from Line 28(d)) .....	1000.00	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	77832.00	77832.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	46763.93	46763.93
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	46763.93	46763.93

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

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

FOR LINE NUMBER: PAGE 6 OF 33  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Fearless PAC**

Full Name (Last, First, Middle Initial)  
**A. Eli Hengst**

Mailing Address 223 Pennsylvania Ave SE

City Washington State DC Zip Code 20003

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

Name of Employer Sonoma Restaurant Occupation Owner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
832.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2014  
**Transaction ID : C9956527**

Amount of Each Receipt this Period  
832.00

\* In-Kind: Event Expense - Food and Drink

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	832.00
<b>TOTAL</b> This Period (last page this line number only).....▶	832.00

**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 7 OF 33
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Fearless PAC**

Full Name (Last, First, Middle Initial)  
**A. AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION COMMITTEE**

Mailing Address 777 6th Street, NW  
Ste 200

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00024521**

Name of Employer Occupation

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  
02 / 26 / 2014  
**Transaction ID : C9936457**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Mailing Address 1625 L STREET NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00011114**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 25 / 2014  
**Transaction ID : C9970029**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**C. ARENT FOX LLP PAC (AFPAC)**

Mailing Address 1717 K St NW

City Washington State DC Zip Code 20006-5343

FEC ID number of contributing federal political committee. **C C00241380**

Name of Employer Occupation

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  
02 / 26 / 2014  
**Transaction ID : C9936458**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 8500.00

**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 8 OF 33
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Fearless PAC**

**A. CHICKASAW NATION**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2020 Lonnie Abbott Blvd  
 City ADA State OK Zip Code 74820  
 FEC ID number of contributing federal political committee. **C** C90007923  
 Name of Employer Occupation  
 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  
 03 / 29 / 2014  
**Transaction ID : C9970010**  
 Amount of Each Receipt this Period  
 1000.00

**B. COUNCIL FOR RESPONSIBLE NUTRITION PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1828 L St NW Ste 510  
 City Washington State DC Zip Code 20036-5102  
 FEC ID number of contributing federal political committee. **C** C00399659  
 Name of Employer Occupation  
 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  
 02 / 26 / 2014  
**Transaction ID : C9936459**  
 Amount of Each Receipt this Period  
 1000.00

**C. CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 601 Pennsylvania Avenue, NW Suite 600 South Building  
 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  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : C9970031**  
 Amount of Each Receipt this Period  
 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7000.00
<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 33
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Fearless PAC**

**A. FRAGOMEN POLITICAL ACTION COMMITTEE (FRAGOMEN PAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 1101 15TH STREET NW  
SUITE 700  
City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00418095

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 14 / 2014  
**Transaction ID : C9956516**  
Amount of Each Receipt this Period: 1000.00

**B. Google NetPAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1101 New York Ave NW  
2nd Floor  
City Washington State DC Zip Code 20005-4269

FEC ID number of contributing federal political committee. **C** C00428623

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 14 / 2014  
**Transaction ID : C9956519**  
Amount of Each Receipt this Period: 5000.00

**C. Human Rights Campaign PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1640 Rhode Island Ave NW  
City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00235853

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 14 / 2014  
**Transaction ID : C9956520**  
Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7000.00

**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 33
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Fearless PAC**

Full Name (Last, First, Middle Initial)  
**A. INTEL Corporation Political Action Committee**

Mailing Address 1155 F STREET N.W. #1025

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00125641

Name of Employer Occupation

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  
 03 / 06 / 2014  
**Transaction ID : C9956514**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. International Brotherhood Of Electrical Workers PAC**

Mailing Address 900 Seventh Street NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

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  
 03 / 31 / 2014  
**Transaction ID : C9981556**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. International Council of Shopping Centers**

Mailing Address 555 12TH STREET, NW  
SUITE 660

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00217638

Name of Employer Occupation

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  
 03 / 14 / 2014  
**Transaction ID : C9956524**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11000.00
<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 11 OF 33
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Fearless PAC**

**A.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL DAIRY FOODS ASSOCIATION (IDFA) - ICE CREAM, MILK & CHEESE PAC

Mailing Address 1250 H STREET, NW  
SUITE 900

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00128231

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
02 / 26 / 2014

**Transaction ID : C9936460**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Investment Company Institute PAC

Mailing Address 1401 H Street NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 25 / 2014

**Transaction ID : C9970025**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
JPMORGAN CHASE & CO. PAC

Mailing Address 601 PENNSYLVANIA AVENUE, NW  
7TH FLOOR

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00128512

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 29 / 2014

**Transaction ID : C9970004**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7000.00
<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 12 OF 33
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Fearless PAC**

Full Name (Last, First, Middle Initial)  
**A. LOCKHEED MARTIN CORPORATION EMPLOYEES' PAC**

Mailing Address 2121 CRYSTAL DRIVE  
SUITE 100

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
03 / 29 / 2014  
**Transaction ID : C9970012**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. MARIJUANA POLICY PROJECT PAC**

Mailing Address PO Box 77492

City Washington State DC Zip Code 20013

FEC ID number of contributing federal political committee. **C** C00389882

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
02 / 26 / 2014  
**Transaction ID : C9936461**

Amount of Each Receipt this Period  
3000.00

Full Name (Last, First, Middle Initial)  
**C. MORTGAGE BANKERS ASSOCIATION PAC (MORPAC)**

Mailing Address 1919 M St NW  
FI 5

City Washington State DC Zip Code 20036-3572

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
02 / 26 / 2014  
**Transaction ID : C9936462**

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 10000.00

**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 13 OF 33
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Fearless PAC**

**A. National Multi Housing Council PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1850 M Street NW  
Ste 540

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00130773

Name of Employer Occupation

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  
03 / 06 / 2014

**Transaction ID : C9956515**

Amount of Each Receipt this Period  
1000.00

**B. NEW DEMOCRAT COALITION PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 700 13th St NW  
Ste 600

City Washington State DC Zip Code 20005-3960

FEC ID number of contributing federal political committee. **C** C00409730

Name of Employer Occupation

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  
03 / 14 / 2014

**Transaction ID : C9956518**

Amount of Each Receipt this Period  
5000.00

**C. NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
Mailing Address 51 MADISON AVENUE  
ROOM 1109

City NEW YORK State NY Zip Code 10010

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 25 / 2014

**Transaction ID : C9970034**

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8500.00
<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 14 OF 33
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Fearless PAC**

**A. Oracle America, Inc. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1015 15th St NW  
 Ste 200  
 City Washington State DC Zip Code 20005-2635  
 FEC ID number of contributing federal political committee. **C** C00323048  
 Name of Employer Occupation  
 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  
 03 / 25 / 2014  
**Transaction ID : C9970024**  
 Amount of Each Receipt this Period  
 5000.00

**B. Pharmavite PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 9606  
 City Mission Hills State CA Zip Code 91346-9606  
 FEC ID number of contributing federal political committee. **C** C00410654  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 26 / 2014  
**Transaction ID : C9936463**  
 Amount of Each Receipt this Period  
 1000.00

**C. PRUDENTIAL FINANCIAL INC STATE AND FEDERAL PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 751 BROAD STREET  
 14TH FLOOR  
 City NEWARK State NJ Zip Code 07102  
 FEC ID number of contributing federal political committee. **C** C00493304  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : C9970023**  
 Amount of Each Receipt this Period  
 1500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7500.00
<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 15 OF 33
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Fearless PAC**

**A. SHEET METAL WORKERS' INTERNATIONAL ASSOCIATION POLITICAL ACTION LEAGUE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1750 NEW YORK AVENUE, NW  
 City WASHINGTON State DC Zip Code 20006  
 FEC ID number of contributing federal political committee. **C** C00007542  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 07 / 2014  
**Transaction ID : C9916021**  
 Amount of Each Receipt this Period  
 2500.00

**B. THE FREETHOUGHT EQUALITY FUND OF THE CENTER FOR HUMANIST ACTIVISM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1777 T STREET NW  
 City WASHINGTON State DC Zip Code 20009  
 FEC ID number of contributing federal political committee. **C** C00545202  
 Name of Employer Occupation  
 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  
 03 / 14 / 2014  
**Transaction ID : C9956517**  
 Amount of Each Receipt this Period  
 1000.00

**C. THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1155 F STREET, NW SUITE 400  
 City WASHINGTON State DC Zip Code 20004  
 FEC ID number of contributing federal political committee. **C** C00284885  
 Name of Employer Occupation  
 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  
 03 / 25 / 2014  
**Transaction ID : C9970026**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4500.00
<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 16 OF 33
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Fearless PAC**

Full Name (Last, First, Middle Initial)  
**A. THE VANGUARD GROUP COMMITTEE FOR RESPONSIBLE GOVERNMENT**

Mailing Address 975 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1457

FEC ID number of contributing federal political committee. **C** C00410266

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
02 / 07 / 2014

**Transaction ID : C9916022**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. TURKISH COALITON USA PAC (TC-USA PAC)**

Mailing Address 1025 Connecticut Ave NW  
Ste 1000

City Washington State DC Zip Code 20036-5417

FEC ID number of contributing federal political committee. **C** C00432526

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 14 / 2014

**Transaction ID : C9956521**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. United Association of the Plumbing and Pipe Fitting Industry**

Mailing Address 3 Park Place

City Annapolis State MD Zip Code 21401

FEC ID number of contributing federal political committee. **C** C00012476

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 14 / 2014

**Transaction ID : C9956525**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	78000.00



**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)  
**Fearless PAC**

Full Name (Last, First, Middle Initial)

**A. Angerholzer Broz LLC**

Mailing Address 499 South Capitol St, SW  
Ste 422

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Finance Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 02 / 2014

**Transaction ID : D471835**

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

**B. Angerholzer Broz LLC**

Mailing Address 499 South Capitol St, SW  
Ste 422

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Postage, Phones and Taxi

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 02 / 2014

**Transaction ID : D471836**

Amount of Each Disbursement this Period

81.09

Full Name (Last, First, Middle Initial)

**C. Angerholzer Broz LLC**

Mailing Address 499 South Capitol St, SW  
Ste 422

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Finance Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 30 / 2014

**Transaction ID : D471837**

Amount of Each Disbursement this Period

5000.00

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

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

9081.09

**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)  
**Fearless PAC**

Full Name (Last, First, Middle Initial)

**A. Angerholzer Broz LLC**

Mailing Address 499 South Capitol St, SW  
Ste 422

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Postage, Phones and Taxi

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 Y  
01 / 30 / 2014

**Transaction ID : D471838**

Amount of Each Disbursement this Period

172.41

Full Name (Last, First, Middle Initial)

**B. Angerholzer Broz LLC**

Mailing Address 499 South Capitol St, SW  
Ste 422

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Finance Consulting

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 Y  
02 / 28 / 2014

**Transaction ID : D471839**

Amount of Each Disbursement this Period

4500.00

Full Name (Last, First, Middle Initial)

**C. Angerholzer Broz LLC**

Mailing Address 499 South Capitol St, SW  
Ste 422

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Postage and Phone

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 Y  
02 / 28 / 2014

**Transaction ID : D471840**

Amount of Each Disbursement this Period

30.51

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

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

4702.92

**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)  
**Fearless PAC**

Full Name (Last, First, Middle Initial)

**A. CO Dept of Revenue**

Mailing Address 1375 Sherman St

City State Zip Code  
Denver CO 80203-2246

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
01 / 29 / 2014

**Transaction ID : D471857**

Amount of Each Disbursement this Period

1069.00

Full Name (Last, First, Middle Initial)

**B. Counting & Compliance LLC**

Mailing Address 6720 S Adams Way

City State Zip Code  
Centennial CO 80122-1802

Purpose of Disbursement  
Compliance Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
01 / 02 / 2014

**Transaction ID : D471832**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Counting & Compliance LLC**

Mailing Address 6720 S Adams Way

City State Zip Code  
Centennial CO 80122-1802

Purpose of Disbursement  
Compliance Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
01 / 30 / 2014

**Transaction ID : D471833**

Amount of Each Disbursement this Period

750.00

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

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

2319.00

**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)

**Fearless PAC**

Full Name (Last, First, Middle Initial)

**A. Counting & Compliance LLC**

Mailing Address 6720 S Adams Way

City State Zip Code  
Centennial CO 80122-1802

Purpose of Disbursement  
Compliance Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2014

**Transaction ID : D471834**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Eli Hengst**

Mailing Address 223 Pennsylvania Ave SE

City State Zip Code  
Washington DC 20003

Purpose of Disbursement  
Event Expense - Food and Drink

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 25 / 2014

**Transaction ID : D468475**

Amount of Each Disbursement this Period

832.00

\* In-Kind Received

Full Name (Last, First, Middle Initial)

**C. Hilltop Public Solutions**

Mailing Address 1000 Potomac St NW  
Ste 500

City State Zip Code  
Washington DC 20007-3552

Purpose of Disbursement  
General Political Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 02 / 2014

**Transaction ID : D471820**

Amount of Each Disbursement this Period

3500.00

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

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

4832.00

**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)  
**Fearless PAC**

Full Name (Last, First, Middle Initial)

**A. Hilltop Public Solutions**

Mailing Address 1000 Potomac St NW  
Ste 500

City Washington State DC Zip Code 20007-3552

Purpose of Disbursement  
General Political Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : D471821

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Hilltop Public Solutions**

Mailing Address 1000 Potomac St NW  
Ste 500

City Washington State DC Zip Code 20007-3552

Purpose of Disbursement  
General Political Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : D471822

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. IRS**

Mailing Address Internal Revenue Service Ctr

City Ogden State UT Zip Code 84201-0001

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : D471855

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Fearless PAC**

Full Name (Last, First, Middle Initial)

**A. IRS**

Mailing Address Internal Revenue Service Ctr

City Ogden State UT Zip Code 84201-0001

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2014

**Transaction ID : D471856**

Amount of Each Disbursement this Period

554.12

Full Name (Last, First, Middle Initial)

**B. Kate Siegel**

Mailing Address 620 12th St

City Boulder State CO Zip Code 80302-7517

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2014

**Transaction ID : D471849**

Amount of Each Disbursement this Period

1397.28

Full Name (Last, First, Middle Initial)

**C. Kate Siegel**

Mailing Address 620 12th St

City Boulder State CO Zip Code 80302-7517

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2014

**Transaction ID : D471850**

Amount of Each Disbursement this Period

996.72

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

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

2948.12

**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)  
**Fearless PAC**

Full Name (Last, First, Middle Initial)

**A. Kate Siegel**

Mailing Address 620 12th St

City Boulder State CO Zip Code 80302-7517

Purpose of Disbursement  
Payroll

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 Y  
02 / 14 / 2014

**Transaction ID : D471851**

Amount of Each Disbursement this Period

1103.50

Full Name (Last, First, Middle Initial)

**B. Kate Siegel**

Mailing Address 620 12th St

City Boulder State CO Zip Code 80302-7517

Purpose of Disbursement  
Payroll

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 Y  
02 / 28 / 2014

**Transaction ID : D471852**

Amount of Each Disbursement this Period

1103.49

Full Name (Last, First, Middle Initial)

**C. Kate Siegel**

Mailing Address 620 12th St

City Boulder State CO Zip Code 80302-7517

Purpose of Disbursement  
Payroll

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 Y  
03 / 13 / 2014

**Transaction ID : D471853**

Amount of Each Disbursement this Period

1103.50

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

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

3310.49

**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)  
**Fearless PAC**

Full Name (Last, First, Middle Initial)

**A. Kate Siegel**

Mailing Address 620 12th St

City Boulder State CO Zip Code 80302-7517

Purpose of Disbursement  
Payroll

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 Y  
03 / 31 / 2014

**Transaction ID : D471854**

Amount of Each Disbursement this Period

1103.50

Full Name (Last, First, Middle Initial)

**B. NGP VAN**

Mailing Address 1101 15th Street NW  
Ste 500

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Database Management Software

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 Y  
02 / 13 / 2014

**Transaction ID : D471841**

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

**C. NGP VAN**

Mailing Address 1101 15th Street NW  
Ste 500

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Database Management Software

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 Y  
02 / 28 / 2014

**Transaction ID : D471842**

Amount of Each Disbursement this Period

300.00

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

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

1703.50



**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)  
**Fearless PAC**

Full Name (Last, First, Middle Initial)  
**A. Sonoma Restaurant**

Mailing Address 233 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1121

Purpose of Disbursement  
Event Expense - Food & Drink

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
02 / 26 / 2014

Transaction ID : **D471861**

Amount of Each Disbursement this Period  
936.32

Full Name (Last, First, Middle Initial)  
**B. The Huttner Group**

Mailing Address 2335 Hillside Way

City Boulder State CO Zip Code 80305-5623

Purpose of Disbursement  
General Political Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
02 / 28 / 2014

Transaction ID : **D471826**

Amount of Each Disbursement this Period  
2000.00

Full Name (Last, First, Middle Initial)  
**C. The Huttner Group**

Mailing Address 2335 Hillside Way

City Boulder State CO Zip Code 80305-5623

Purpose of Disbursement  
General Political Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
01 / 02 / 2014

Transaction ID : **D471823**

Amount of Each Disbursement this Period  
3000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5936.32

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



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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Fearless PAC**

Full Name (Last, First, Middle Initial)

**A. Topaz Hotel**

Mailing Address 1733 N Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Lodging

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 Y  
02 / 07 / 2014

**Transaction ID : D471831**

Amount of Each Disbursement this Period

143.51

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. The Huttner Group**

Mailing Address 2335 Hillside Way

City Boulder State CO Zip Code 80305-5623

Purpose of Disbursement  
Travel Expenses - Airline Ticket and Lodging

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 Y  
03 / 14 / 2014

**Transaction ID : D471827**

Amount of Each Disbursement this Period

749.30

Full Name (Last, First, Middle Initial)

**C. Frontier Airlines**

Mailing Address 7001 Tower Rd  
Frontier Center One

City Denver State CO Zip Code 80249-7312

Purpose of Disbursement  
Airline Ticket

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 Y  
03 / 14 / 2014

**Transaction ID : D471828**

Amount of Each Disbursement this Period

398.21

**[MEMO ITEM]**

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

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

749.30

# 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)

**Fearless PAC**

Full Name (Last, First, Middle Initial)

### A. Topaz Hotel

Mailing Address 1733 N Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : D471829

Amount of Each Disbursement this Period

2	1	5	.	2	6
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--	--

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

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

0	.	0	0
---	---	---	---

4	6	5	8	3	.	3	1
---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Fearless PAC**

Full Name (Last, First, Middle Initial)

**A. KIRKPATRICK FOR ARIZONA**

Mailing Address PO BOX 12011

City State Zip Code  
CASA GRANDE AZ 85130

Purpose of Disbursement  
Contribution

Candidate Name  
**ANN KIRKPATRICK**

Office Sought:  House  
 Senate  
 President  
State: AZ District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
03 / 21 / 2014

**Transaction ID : D471801**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. PETERSON FOR CONGRESS**

Mailing Address 26192 FLOYD LAKE POINT ROAD

City State Zip Code  
DETROIT LAKES MN 56502

Purpose of Disbursement  
Contribution

Candidate Name  
**COLLIN CLARK PETERSON**

Office Sought:  House  
 Senate  
 President  
State: MN District: 07

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
03 / 21 / 2014

**Transaction ID : D471806**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. ERIN BILBRAY FOR CONGRESS**

Mailing Address 9101 W SAHARA AVE STE 105 B20

City State Zip Code  
LAS VEGAS NV 89117

Purpose of Disbursement  
Contribution

Candidate Name  
**ERIN BILBRAY KOHN**

Office Sought:  House  
 Senate  
 President  
State: NV District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
03 / 21 / 2014

**Transaction ID : D471800**

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Fearless PAC**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF CHERI BUSTOS**

Mailing Address P.O. BOX 77

City EAST MOLINE State IL Zip Code 61244

Purpose of Disbursement  
Contribution

Candidate Name  
**CHERI BUSTOS**

Office Sought:  House  
 Senate  
 President  
State: IL District: 17

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			21			2014			

**Transaction ID : D471804**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Friends of Elizabeth Esty**

Mailing Address PO BOX 61

City CHESHIRE State CT Zip Code 06410

Purpose of Disbursement  
Contribution

Candidate Name  
**ELIZABETH ESTY**

Office Sought:  House  
 Senate  
 President  
State: CT District: 05

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			21			2014			

**Transaction ID : D471803**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. GRAHAM FOR CONGRESS**

Mailing Address PO BOX 310

City TALLAHASSEE State FL Zip Code 32302

Purpose of Disbursement  
Contribution

Candidate Name  
**GWEN GRAHAM**

Office Sought:  House  
 Senate  
 President  
State: FL District: 02

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			31			2014			

**Transaction ID : D471808**

Amount of Each Disbursement this Period

1000.00
---------

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

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

3000.00
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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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Fearless PAC**

Full Name (Last, First, Middle Initial)

**A. JOE GARCIA FOR CONGRESS**

Mailing Address PO BOX 330871

City MIAMI State FL Zip Code 33233

Purpose of Disbursement  
Contribution

Candidate Name  
**JOE GARCIA**

Office Sought:  House  
 Senate  
 President  
State: FL District: 26

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : D471799**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. SERRANO FOR CONGRESS**

Mailing Address P.O. BOX 70980

City WASHINGTON State DC Zip Code 20024

Purpose of Disbursement  
Contribution

Candidate Name  
**JOSE E SERRANO**

Office Sought:  House  
 Senate  
 President  
State: NY District: 15

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : D471805**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Kuster for Congress**

Mailing Address PO Box 1498

City Concord State NH Zip Code 03302-1498

Purpose of Disbursement  
Contribution

Candidate Name  
**Ann M Kuster**

Office Sought:  House  
 Senate  
 President  
State: NH District: 02

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2014

**Transaction ID : D471807**

Amount of Each Disbursement this Period

1000.00
---------

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

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

3000.00
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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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Fearless PAC**

Full Name (Last, First, Middle Initial)

**A. Kyrsten Sinema for Congress**

Mailing Address PO Box 25879

City State Zip Code  
Tempe AZ 85285

Purpose of Disbursement  
Contribution

Candidate Name

**Krysten Sinema**

Office Sought:  House  
 Senate  
 President  
State: AZ District: 09

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : D471797**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. SCOTT PETERS FOR CONGRESS**

Mailing Address PO BOX 70980

City State Zip Code  
WASHINGTON DC 20024

Purpose of Disbursement  
Contribution

Candidate Name

**SCOTT PETERS**

Office Sought:  House  
 Senate  
 President  
State: CA District: 52

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : D471798**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. DELBENE FOR CONGRESS**

Mailing Address PO BOX 487

City State Zip Code  
BOTHELL WA 98041

Purpose of Disbursement  
Contribution

Candidate Name

**SUZAN K DELBENE**

Office Sought:  House  
 Senate  
 President  
State: WA District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : D471802**

Amount of Each Disbursement this Period

1000.00
---------

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

3000.00
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**TOTAL** This Period (last page this line number only)..... ▶

12000.00
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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 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 checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Fearless PAC**

Full Name (Last, First, Middle Initial)

**A. NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS, INC.PAC**

Date of Disbursement

Mailing Address 1875 I STREET, NW  
SUITE 600

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2014

City WASHINGTON State DC Zip Code 20006

**Transaction ID : D471819**

Purpose of Disbursement  
Contribution Refund

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1000.00
---------

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

Date of Disbursement

Mailing Address

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

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

Date of Disbursement

Mailing Address

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

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

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

1000.00
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1000.00
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