

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

VOTE 2 REDUCE DEBT (V2RD)

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="332376.24"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1460524.79"/>	<input type="text" value="2058932.23"/>
(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="1792901.03"/>	<input type="text" value="2058932.23"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1756741.26"/>	<input type="text" value="2022772.46"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="36159.77"/>	<input type="text" value="36159.77"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="52500.00"/>	

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

VOTE 2 REDUCE DEBT (V2RD)

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).....	1457161.65	2054361.65
(ii) Unitemized	1101.00	2304.01
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1458262.65	2056665.66
(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)	1458262.65	2056665.66
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).....	2248.75	2248.75
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	13.39	17.82
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))..... ▶	1460524.79	2058932.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1460524.79	2058932.23

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	789998.41	1016029.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	789998.41	1016029.61
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)	966742.85	1006742.85
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)) ..	1756741.26	2022772.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1756741.26	2022772.46

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)	1458262.65	2056665.66
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1458262.65	2056665.66
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	789998.41	1016029.61
37. Offsets to Operating Expenditures (from Line 15, page 3).....	2248.75	2248.75
38. Net Operating Expenditures (subtract Line 37 from Line 36)	787749.66	1013780.86

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

Report is amended to correct clerical errors regarding certain transactions with regard to dates that reflected a typographical error showing the year as 2015 instead of 2014, to add transactions on Sch D for certain independent expenditures with dissemination dates that fell within this reporting period and were disclosed on 24/48 Hour Notices filed during the reporting period even though the committee did not have a debt or obligation to pay such amount until a date after the closing date of this report. Such Sch D transactions are added as a work around for the functional limitations of the FEC Filing Software (FFS). Please see the Miscellaneous Statement Form 99 filed contemporaneously with this amended report regarding additional related facts for the Sch D entries, and FFS functional limitations that impact the Calendar Year-To-Date Per Election totals for Sch E when memo entries are utilized.

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: PAGE 7 OF 165
(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)
VOTE 2 REDUCE DEBT (V2RD)

A. Stephen Castle
 Full Name (Last, First, Middle Initial)
 Mailing Address 3914 Fairwood Court
 City Midland State TX Zip Code 79707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cowboys Resources Corp Occupation President
 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
 08 / 05 / 2014
Transaction ID : SA11AI.5078
 Amount of Each Receipt this Period
 500.00

B. David Dike Fine Art LLC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2613 Fairmount
 City Fort Worth State TX Zip Code 75201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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
 07 / 14 / 2014
Transaction ID : SA11AI.5064
 Amount of Each Receipt this Period
 500.00

C. Mr. KENNETH W. DAVIS JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 999
 City FORT WORTH State TX Zip Code 76101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ken Davis Finance Occupation Board Chairman
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 578320.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2014
Transaction ID : SA11AI.5065
 Amount of Each Receipt this Period
 320.50
 In-kind - Airfare for Presentation

SUBTOTAL of Receipts This Page (optional)..... ▶ 1320.50
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 165
	<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)
VOTE 2 REDUCE DEBT (V2RD)

A. Mr. KENNETH W. DAVIS JR.

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 999

City State Zip Code
FORT WORTH TX 76101

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

Name of Employer Occupation
Ken Davis Finance Board Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
579104.30

Date of Receipt
07 / 21 / 2014

Transaction ID : SA11AI.5069

Amount of Each Receipt this Period
783.80

In-kind - Airfare for Conference

B. Mr. KENNETH W. DAVIS JR.

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 999

City State Zip Code
FORT WORTH TX 76101

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

Name of Employer Occupation
Ken Davis Finance Board Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
580220.70

Date of Receipt
07 / 22 / 2014

Transaction ID : SA11AI.5071

Amount of Each Receipt this Period
1116.40

In-kind - Airfare for Conference

C. Mr. KENNETH W. DAVIS JR.

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 999

City State Zip Code
FORT WORTH TX 76101

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

Name of Employer Occupation
Ken Davis Finance Board Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
769449.40

Date of Receipt
08 / 08 / 2014

Transaction ID : SA11AI.5081

Amount of Each Receipt this Period
189228.90

SUBTOTAL of Receipts This Page (optional).....▶	191128.90
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)

A. Mr. KENNETH W. DAVIS JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 999
 City State Zip Code
 FORT WORTH TX 76101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ken Davis Finance Occupation Board Chairman
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1260785.40

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 15 / 2014
Transaction ID : SA11AI.5083
 Amount of Each Receipt this Period
 491336.00

B. Mr. KENNETH W. DAVIS JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 999
 City State Zip Code
 FORT WORTH TX 76101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ken Davis Finance Occupation Board Chairman
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1303341.77

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 21 / 2014
Transaction ID : SA11AI.5084
 Amount of Each Receipt this Period
 42556.37

C. Mr. KENNETH W. DAVIS JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 999
 City State Zip Code
 FORT WORTH TX 76101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ken Davis Finance Occupation Board Chairman
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1439894.10

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2014
Transaction ID : SA11AI.5086
 Amount of Each Receipt this Period
 136552.33

SUBTOTAL of Receipts This Page (optional)..... ▶ 670444.70
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 165
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial) A. Mr. KENNETH W. DAVIS JR.		Date of Receipt MM / DD / YYYY 09 / 04 / 2014 Transaction ID : SA11AI.5087
Mailing Address PO Box 999		Amount of Each Receipt this Period 400000.00
City FORT WORTH	State TX	Zip Code 76101
FEC ID number of contributing federal political committee. C		
Name of Employer Ken Davis Finance	Occupation Board Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1839894.10	

Full Name (Last, First, Middle Initial) B. Mr. KENNETH W. DAVIS JR.		Date of Receipt MM / DD / YYYY 09 / 17 / 2014 Transaction ID : SA11AI.5089
Mailing Address PO Box 999		Amount of Each Receipt this Period 22.05
City FORT WORTH	State TX	Zip Code 76101
FEC ID number of contributing federal political committee. C		
Name of Employer Ken Davis Finance	Occupation Board Chairman	In-kind - Shipping Costs
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1839916.15	

Full Name (Last, First, Middle Initial) C. Mr. KENNETH W. DAVIS JR.		Date of Receipt MM / DD / YYYY 09 / 19 / 2014 Transaction ID : SA11AI.5091
Mailing Address PO Box 999		Amount of Each Receipt this Period 83306.00
City FORT WORTH	State TX	Zip Code 76101
FEC ID number of contributing federal political committee. C		
Name of Employer Ken Davis Finance	Occupation Board Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1923222.15	

SUBTOTAL of Receipts This Page (optional).....▶	483328.05
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 11 OF 165
	<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)
VOTE 2 REDUCE DEBT (V2RD)

A. Mr. KENNETH W. DAVIS JR.
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 999

City FORT WORTH State TX Zip Code 76101

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

Name of Employer Ken Davis Finance Occupation Board Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1982411.65

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.5093

Amount of Each Receipt this Period
59189.50

B. Mr. Neil Florer
Full Name (Last, First, Middle Initial)

Mailing Address 3311 Stanolind

City Midland State TX Zip Code 79707

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2014

Transaction ID : SA11AI.5079

Amount of Each Receipt this Period
250.00

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

Mailing Address 3209 Reo Dr

City Midland State TX Zip Code 79705

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

Name of Employer Great Western Drilling Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.5075

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	59689.50
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 12 OF 165
	<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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial) A. Charlie Harris			Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2014 Transaction ID : SA11AI.5076
Mailing Address 5606 Camden			Amount of Each Receipt this Period 250.00
City Midland	State TX	Zip Code 79707	
FEC ID number of contributing federal political committee. C			
Name of Employer Charlie Harris Insurance Agenc	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. SOS Environmental Inc			Date of Receipt M M / D D / Y Y Y Y Y 09 / 09 / 2014 Transaction ID : SA11AI.5088
Mailing Address PO Box 2157			Amount of Each Receipt this Period 50000.00
City Conroe	State TX	Zip Code 77305	
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00		

Full Name (Last, First, Middle Initial) C. Becky Williams			Date of Receipt M M / D D / Y Y Y Y Y 08 / 06 / 2014 Transaction ID : SA11AI.5080
Mailing Address 2015 Coleman Ct			Amount of Each Receipt this Period 1000.00
City Midland	State TX	Zip Code 79705	
FEC ID number of contributing federal political committee. C			
Name of Employer Great Western Drilling	Occupation Controller		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional).....▶	51250.00
TOTAL This Period (last page this line number only).....▶	1457161.65

**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 165
<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)
VOTE 2 REDUCE DEBT (V2RD)

A. ADP
Full Name (Last, First, Middle Initial)
Mailing Address 1 ADP Blvd
Ste 1
City Roseland State NJ Zip Code 07068
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
07 / 17 / 2014
Transaction ID : SA15.5212
Amount of Each Receipt this Period
459.00
Reversal of Tax Deduction

B. Atterra 25
Full Name (Last, First, Middle Initial)
Mailing Address 526 39th St
City Des Moines State IA Zip Code 50312
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
09 / 30 / 2014
Transaction ID : SA15.5718
Amount of Each Receipt this Period
334.99
Refund of Overpayment of Rent

C. Pressman Printing Inc
Full Name (Last, First, Middle Initial)
Mailing Address 8308 Clifford St
City Fort Worth State TX Zip Code 76108
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
09 / 30 / 2014
Transaction ID : SA15.5720
Amount of Each Receipt this Period
942.56
Refund of Overpayment of Shipping

SUBTOTAL of Receipts This Page (optional).....▶	1736.55
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 14 OF 165	
(check only one)			
<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)
VOTE 2 REDUCE DEBT (V2RD)

A. Walmart
Full Name (Last, First, Middle Initial)
Mailing Address 702 SW 8th St
City Bentonville State AR Zip Code 72716
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 277.11

Date of Receipt
MM / DD / YYYY
09 / 22 / 2014
Transaction ID : SA15.5710
Amount of Each Receipt this Period
277.11
Refund of Office Expendure Purchase

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
MM / DD / YYYY
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
MM / DD / YYYY
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	277.11
TOTAL This Period (last page this line number only).....▶	2013.66

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. 815 Houston L.P.

Mailing Address 2501 Parkview

City Fort Worth State TX Zip Code 76102

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 11 / 2014

Transaction ID : SB21B.5439

Amount of Each Disbursement this Period

1810.87

Full Name (Last, First, Middle Initial)

B. 815 Houston L.P.

Mailing Address 2501 Parkview

City Fort Worth State TX Zip Code 76102

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : SB21B.5738

Amount of Each Disbursement this Period

1810.87

Full Name (Last, First, Middle Initial)

C. 815 Houston L.P.

Mailing Address 2501 Parkview

City Fort Worth State TX Zip Code 76102

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 05 / 2014

Transaction ID : SB21B.5739

Amount of Each Disbursement this Period

1810.87

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

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

5432.61

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4333 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement
Transportation Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2014

Transaction ID : SB21B.5741

Amount of Each Disbursement this Period

434.10

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4333 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement
Transportation Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 07 / 2014

Transaction ID : SB21B.5742

Amount of Each Disbursement this Period

1154.20

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement
Airline Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 09 / 2014

Transaction ID : SB21B.5743

Amount of Each Disbursement this Period

50.00

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

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

1638.30

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4333 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement
Office Equipment Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 13 / 2014

Transaction ID : SB21B.5744

Amount of Each Disbursement this Period

2273.25

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address PO Box 5014

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement
Internet Bill

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 23 / 2014

Transaction ID : SB21B.5437

Amount of Each Disbursement this Period

132.55

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address PO Box 5014

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement
Phone Bill

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 23 / 2014

Transaction ID : SB21B.5438

Amount of Each Disbursement this Period

215.87

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

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

2621.67

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address PO Box 5014

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement
Phone Bill

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5745

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address PO Box 5014

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement
Internet Bill

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5746

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address PO Box 5014

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement
Phone Bill

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5747

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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address PO Box 5014

City State Zip Code
Carol Stream IL 60197

Purpose of Disbursement
Internet Bill

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2014

Transaction ID : SB21B.5748

Amount of Each Disbursement this Period

132.55

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address PO Box 947

City State Zip Code
American Fort UT 84003

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2014

Transaction ID : SB21B.5127

Amount of Each Disbursement this Period

136.14

Full Name (Last, First, Middle Initial)

C. B&H

Mailing Address 420 Ninth Avenue

City State Zip Code
New York NY 10001

Purpose of Disbursement
Presentation Screen and Equipement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB21B.5442

Amount of Each Disbursement this Period

569.13

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

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

837.82

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Belles Chicken Dinner House

Mailing Address 2002 N Clack St

City Abilene State TX Zip Code 79603

Purpose of Disbursement
Reimbursement for Travel Meals - M Hamilton

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 13 / 2014

Transaction ID : SB21B.5749

Amount of Each Disbursement this Period

16.22

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. ccAdvertising

Mailing Address 14001C Saint German Dr Ste 353

City Centerville State VA Zip Code 20121

Purpose of Disbursement
Call Surveys and Get Out the Vote

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2014

Transaction ID : SB21B.4376

Amount of Each Disbursement this Period

50000.00

Full Name (Last, First, Middle Initial)

C. Christy Cromwell

Mailing Address 6245 Rufe Snow Dr

City Fort Worth State TX Zip Code 76148

Purpose of Disbursement
Locksmith

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 28 / 2014

Transaction ID : SB21B.5448

Amount of Each Disbursement this Period

214.00

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

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

50214.00

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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Cockrell Enovation

Mailing Address PO Box 1568

City Fort Worth State TX Zip Code 76101

Purpose of Disbursement
Printing Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2014

Transaction ID : SB21B.5752

Amount of Each Disbursement this Period

529.18

Full Name (Last, First, Middle Initial)

B. Color Press

Mailing Address 2103 Parkview Dr

City Fort Worth State TX Zip Code 76185

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 16 / 2014

Transaction ID : SB21B.5451

Amount of Each Disbursement this Period

252.73

Full Name (Last, First, Middle Initial)

C. David Goldberg Blogs

Mailing Address PO Box 2755

City Sugar Land State TX Zip Code 77478

Purpose of Disbursement
Writer

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : SB21B.5753

Amount of Each Disbursement this Period

3000.00

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

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

3781.91

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. David Goldberg Blogs

Mailing Address PO Box 2755

City State Zip Code
Sugar Land TX 77478

Purpose of Disbursement
Writer

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5754

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Mr. KENNETH W. DAVIS JR.

Mailing Address PO Box 999

City State Zip Code
FORT WORTH TX 76101

Purpose of Disbursement
In-kind - Airfare for Presentation

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5066

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Mr. KENNETH W. DAVIS JR.

Mailing Address PO Box 999

City State Zip Code
FORT WORTH TX 76101

Purpose of Disbursement
In-kind - Airfare for Conference

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5070

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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Mr. KENNETH W. DAVIS JR.

Mailing Address PO Box 999

City State Zip Code
FORT WORTH TX 76101

Purpose of Disbursement
In-kind - Airfare for Conference

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 22 / 2014

Transaction ID : SB21B.5072

Amount of Each Disbursement this Period

1116.40

Full Name (Last, First, Middle Initial)

B. Mr. KENNETH W. DAVIS JR.

Mailing Address PO Box 999

City State Zip Code
FORT WORTH TX 76101

Purpose of Disbursement
In-kind - Shipping Costs

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2014

Transaction ID : SB21B.5090

Amount of Each Disbursement this Period

22.05

Full Name (Last, First, Middle Initial)

C. Family Leader

Mailing Address PO Box 42245

City State Zip Code
Urbandale IA 50323

Purpose of Disbursement
Conference Attendance Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : SB21B.5757

Amount of Each Disbursement this Period

10000.00

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

11138.45

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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial) A. Farmers & Parkers LP		Date of Disbursement MM / DD / YYYY 07 / 11 / 2014
Mailing Address 2501 Parkview Drive Ste 418		Transaction ID : SB21B.5452
City Fort Worth	State TX	
Purpose of Disbursement Monthly Garage Rent	Candidate Name	Amount of Each Disbursement this Period 300.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Farmers & Parkers LP		Date of Disbursement MM / DD / YYYY 08 / 11 / 2014
Mailing Address 2501 Parkview Drive Ste 418		Transaction ID : SB21B.5758
City Fort Worth	State TX	
Purpose of Disbursement Monthly Garage Rent	Candidate Name	Amount of Each Disbursement this Period 200.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Farmers & Parkers LP		Date of Disbursement MM / DD / YYYY 09 / 05 / 2014
Mailing Address 2501 Parkview Drive Ste 418		Transaction ID : SB21B.5759
City Fort Worth	State TX	
Purpose of Disbursement Monthly Garage Rent	Candidate Name	Amount of Each Disbursement this Period 200.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. FedEx

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

Mailing Address 3875 Airways Module H3
Dept 4634

Transaction ID : SB21B.5456

City Memphis State TN Zip Code 38116

Amount of Each Disbursement this Period

109.94

Purpose of Disbursement
Shipping

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. FedEx

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		03		2014

Mailing Address 3875 Airways Module H3
Dept 4634

Transaction ID : SB21B.5457

City Memphis State TN Zip Code 38116

Amount of Each Disbursement this Period

116.04

Purpose of Disbursement
Shipping

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. FedEx

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		09		2014

Mailing Address 3875 Airways Module H3
Dept 4634

Transaction ID : SB21B.5224

City Memphis State TN Zip Code 38116

Amount of Each Disbursement this Period

5.40

Purpose of Disbursement
Shipping

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

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

231.38

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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

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NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. FedEx

Mailing Address 3875 Airways Module H3
Dept 4634

City Memphis State TN Zip Code 38116

Purpose of Disbursement
Reimbursement - M Hamilton

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
07 / 11 / 2014

Transaction ID : SB21B.5488

Amount of Each Disbursement this Period

276.25

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FedEx

Mailing Address 3875 Airways Module H3
Dept 4634

City Memphis State TN Zip Code 38116

Purpose of Disbursement
Shipping

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
07 / 15 / 2014

Transaction ID : SB21B.5458

Amount of Each Disbursement this Period

350.72

Full Name (Last, First, Middle Initial)

C. FedEx

Mailing Address 3875 Airways Module H3
Dept 4634

City Memphis State TN Zip Code 38116

Purpose of Disbursement
Reimbursement for Printing and Presentation Supplies - M Hamilton

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
07 / 21 / 2014

Transaction ID : SB21B.5485

Amount of Each Disbursement this Period

265.74

[MEMO ITEM]

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

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

350.72

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. FedEx

Mailing Address 3875 Airways Module H3
Dept 4634

City Memphis State TN Zip Code 38116

Purpose of Disbursement Reimbursement for Printing and Presentation Supplies - M. Hamilton

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2014

Transaction ID : SB21B.5486

Amount of Each Disbursement this Period

116.64

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FedEx

Mailing Address 3875 Airways Module H3
Dept 4634

City Memphis State TN Zip Code 38116

Purpose of Disbursement Shipping

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 23 / 2014

Transaction ID : SB21B.5454

Amount of Each Disbursement this Period

38.16

Full Name (Last, First, Middle Initial)

C. FedEx

Mailing Address 3875 Airways Module H3
Dept 4634

City Memphis State TN Zip Code 38116

Purpose of Disbursement Shipping

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB21B.5453

Amount of Each Disbursement this Period

33.61

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

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

71.77

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. FedEx

Mailing Address 3875 Airways Module H3
Dept 4634

City Memphis State TN Zip Code 38116

Purpose of Disbursement
Shipping

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2014

Transaction ID : SB21B.5760

Amount of Each Disbursement this Period

7.03

Full Name (Last, First, Middle Initial)

B. FedEx

Mailing Address 3875 Airways Module H3
Dept 4634

City Memphis State TN Zip Code 38116

Purpose of Disbursement
Reimbursement for Copy Services - A Holland

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 25 / 2014

Transaction ID : SB21B.5761

Amount of Each Disbursement this Period

29.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FedEx

Mailing Address 3875 Airways Module H3
Dept 4634

City Memphis State TN Zip Code 38116

Purpose of Disbursement
Shipping

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2014

Transaction ID : SB21B.5762

Amount of Each Disbursement this Period

75.70

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

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

82.73

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. FedEx

Mailing Address 3875 Airways Module H3
Dept 4634

City Memphis State TN Zip Code 38116

Purpose of Disbursement
Reimbursement for Office Supplies - M Hamilton

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5763

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FedEx

Mailing Address 3875 Airways Module H3
Dept 4634

City Memphis State TN Zip Code 38116

Purpose of Disbursement
Shipping

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5764

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. FedEx

Mailing Address 3875 Airways Module H3
Dept 4634

City Memphis State TN Zip Code 38116

Purpose of Disbursement
In-kind - Shipping Costs K. Davis

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5122

Amount of Each Disbursement this Period

[MEMO ITEM]

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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Marcie Finney

Mailing Address 2508 College Ave

City Fort Worth State TX Zip Code 76110

Purpose of Disbursement
Services for Printing and Design

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 09 / 2014

Transaction ID : SB21B.5480

Amount of Each Disbursement this Period

4250.00

Full Name (Last, First, Middle Initial)

B. Marcie Finney

Mailing Address 2508 College Ave

City Fort Worth State TX Zip Code 76110

Purpose of Disbursement
Services for Printing and Production

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 12 / 2014

Transaction ID : SB21B.5481

Amount of Each Disbursement this Period

1909.00

Full Name (Last, First, Middle Initial)

C. Marcie Finney

Mailing Address 2508 College Ave

City Fort Worth State TX Zip Code 76110

Purpose of Disbursement
Services for Printing and Design

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 05 / 2014

Transaction ID : SB21B.4607

Amount of Each Disbursement this Period

733.28

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

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

6892.28

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Fort Worth Screen Printing

Mailing Address 200 Carroll St

City Fort Worth State TX Zip Code 76107

Purpose of Disbursement
TShirts

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5766

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Four Color Press

Mailing Address 2904 Cullen St

City Fort Worth State TX Zip Code 76107

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5460

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Four Color Press

Mailing Address 2904 Cullen St

City Fort Worth State TX Zip Code 76107

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5459

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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Shana Franklin

Mailing Address 13 Gleneagle Cir

City Napa State CA Zip Code 94558

Purpose of Disbursement
Grassroots Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 09 / 2014

Transaction ID : SB21B.5515

Amount of Each Disbursement this Period

806.40

Full Name (Last, First, Middle Initial)

B. Ephraim Froelich

Mailing Address 1785 Evergreen Ave

City Juneau State AK Zip Code 99801

Purpose of Disbursement
GOTV Consultant Fees and Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2014

Transaction ID : SB21B.5131

Amount of Each Disbursement this Period

876.54

Full Name (Last, First, Middle Initial)

C. Gober Hilgers PLLC

Mailing Address 1005 Congress Ave
Ste 350

City Austin State TX Zip Code 78701

Purpose of Disbursement
Legal Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 08 / 2014

Transaction ID : SB21B.5463

Amount of Each Disbursement this Period

8453.50

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

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

10136.44

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Gober Hilgers PLLC

Mailing Address 1005 Congress Ave
Ste 350

City Austin State TX Zip Code 78701

Purpose of Disbursement
Legal and Compliance Services

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
09 / 29 / 2014

Transaction ID : SB21B.5768

Amount of Each Disbursement this Period

40799.45

Full Name (Last, First, Middle Initial)

B. GotPrint

Mailing Address 7651 N San Fernando Rd

City Burbank State CA Zip Code 91505

Purpose of Disbursement
Printing

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
07 / 03 / 2014

Transaction ID : SB21B.5464

Amount of Each Disbursement this Period

498.83

Full Name (Last, First, Middle Initial)

C. Grace Admin Services Inc.

Mailing Address 672 Bear Creek Dr

City Hurst State TX Zip Code 76054

Purpose of Disbursement
Staffing Services

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
08 / 14 / 2014

Transaction ID : SB21B.5769

Amount of Each Disbursement this Period

366.80

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

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

41665.08

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Grace Admin Services Inc.

Mailing Address 672 Bear Creek Dr

City State Zip Code
Hurst TX 76054

Purpose of Disbursement
Staffing Services

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
09	/	17	/	2014

Transaction ID : SB21B.5770

Amount of Each Disbursement this Period

420.00

Full Name (Last, First, Middle Initial)

B. Monica Hamilton

Mailing Address 6112 Zephyr Way
Apt 1713

City State Zip Code
Fort Worth TX 76101

Purpose of Disbursement
Salary

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
07	/	01	/	2014

Transaction ID : SB21B.5528

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Monica Hamilton

Mailing Address 6112 Zephyr Way
Apt 1713

City State Zip Code
Fort Worth TX 76101

Purpose of Disbursement
Reimbursement for Printing and Presentation Supplies

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
07	/	11	/	2014

Transaction ID : SB21B.5487

Amount of Each Disbursement this Period

276.25

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

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

2696.25

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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

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NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Monica Hamilton

Mailing Address 6112 Zephyr Way
Apt 1713

City Fort Worth State TX Zip Code 76101

Purpose of Disbursement
Salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2014

Transaction ID : SB21B.5539

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Monica Hamilton

Mailing Address 6112 Zephyr Way
Apt 1713

City Fort Worth State TX Zip Code 76101

Purpose of Disbursement
Reimbursement for Printing and Presentation Supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2014

Transaction ID : SB21B.5483

Amount of Each Disbursement this Period

116.64

Full Name (Last, First, Middle Initial)

C. Monica Hamilton

Mailing Address 6112 Zephyr Way
Apt 1713

City Fort Worth State TX Zip Code 76101

Purpose of Disbursement
Reimbursement for Printing and Presentation Supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2014

Transaction ID : SB21B.5484

Amount of Each Disbursement this Period

265.74

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

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

2382.38

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Monica Hamilton

Mailing Address 6112 Zephyr Way
Apt 1713

City Fort Worth State TX Zip Code 76101

Purpose of Disbursement
Salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : SB21B.5540

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Monica Hamilton

Mailing Address 6112 Zephyr Way
Apt 1713

City Fort Worth State TX Zip Code 76101

Purpose of Disbursement
F&B for Staff Meeting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : SB21B.5725

Amount of Each Disbursement this Period

91.62

Full Name (Last, First, Middle Initial)

C. Monica Hamilton

Mailing Address 6112 Zephyr Way
Apt 1713

City Fort Worth State TX Zip Code 76101

Purpose of Disbursement
Reimbursement for Travel Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 13 / 2014

Transaction ID : SB21B.5726

Amount of Each Disbursement this Period

45.93

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

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

2137.55

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Monica Hamilton

Mailing Address 6112 Zephyr Way
Apt 1713

City Fort Worth State TX Zip Code 76101

Purpose of Disbursement
Salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5541

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Monica Hamilton

Mailing Address 6112 Zephyr Way
Apt 1713

City Fort Worth State TX Zip Code 76101

Purpose of Disbursement
Salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5542

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Monica Hamilton

Mailing Address 6112 Zephyr Way
Apt 1713

City Fort Worth State TX Zip Code 76101

Purpose of Disbursement
Reimbursement for Office Supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5727

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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Monica Hamilton

Mailing Address 6112 Zephyr Way
Apt 1713

City Fort Worth State TX Zip Code 76101

Purpose of Disbursement
Salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 15 / 2014

Transaction ID : SB21B.5536

Amount of Each Disbursement this Period

2043.75

Full Name (Last, First, Middle Initial)

B. Monica Hamilton

Mailing Address 6112 Zephyr Way
Apt 1713

City Fort Worth State TX Zip Code 76101

Purpose of Disbursement
Reimbursement for Office Supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2014

Transaction ID : SB21B.5728

Amount of Each Disbursement this Period

18.39

Full Name (Last, First, Middle Initial)

C. Monica Hamilton

Mailing Address 6112 Zephyr Way
Apt 1713

City Fort Worth State TX Zip Code 76101

Purpose of Disbursement
Salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2014

Transaction ID : SB21B.5533

Amount of Each Disbursement this Period

2200.00

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

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

4262.14

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Janee Hill

Mailing Address 411 W 7th St
Apt 1007

City Fort Worth State TX Zip Code 76102

Purpose of Disbursement
Salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2014

Transaction ID : SB21B.5529

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

B. Janee Hill

Mailing Address 411 W 7th St
Apt 1007

City Fort Worth State TX Zip Code 76102

Purpose of Disbursement
Salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2014

Transaction ID : SB21B.5549

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

C. Janee Hill

Mailing Address 411 W 7th St
Apt 1007

City Fort Worth State TX Zip Code 76102

Purpose of Disbursement
Reimbursement for Mileage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 22 / 2014

Transaction ID : SB21B.5469

Amount of Each Disbursement this Period

25.00

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

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

12025.00

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Janee Hill

Mailing Address 411 W 7th St
Apt 1007

City Fort Worth State TX Zip Code 76102

Purpose of Disbursement
Reimbursement for Mileage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 23 / 2014

Transaction ID : SB21B.5471

Amount of Each Disbursement this Period

28.26

Full Name (Last, First, Middle Initial)

B. Janee Hill

Mailing Address 411 W 7th St
Apt 1007

City Fort Worth State TX Zip Code 76102

Purpose of Disbursement
Reimbursement for Mileage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 24 / 2014

Transaction ID : SB21B.5472

Amount of Each Disbursement this Period

110.42

Full Name (Last, First, Middle Initial)

C. Janee Hill

Mailing Address 411 W 7th St
Apt 1007

City Fort Worth State TX Zip Code 76102

Purpose of Disbursement
Salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : SB21B.5550

Amount of Each Disbursement this Period

6000.00

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

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

6138.68

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)
A. Randal Hill

Date of Disbursement: MM / DD / YYYY
07 / 01 / 2014

Mailing Address: 411 W 7th St
Apt 1007

City: Fort Worth State: TX Zip Code: 76102

Purpose of Disbursement: Salary

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B.5530**

Amount of Each Disbursement this Period: 9000.00

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

Date of Disbursement: MM / DD / YYYY
07 / 15 / 2014

Mailing Address: 411 W 7th St
Apt 1007

City: Fort Worth State: TX Zip Code: 76102

Purpose of Disbursement: Salary

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B.5555**

Amount of Each Disbursement this Period: 9000.00

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

Date of Disbursement: MM / DD / YYYY
08 / 01 / 2014

Mailing Address: 411 W 7th St
Apt 1007

City: Fort Worth State: TX Zip Code: 76102

Purpose of Disbursement: Salary

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B.5556**

Amount of Each Disbursement this Period: 9000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶ 27000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Hilton Garden Inn

Mailing Address 1301 North Loop 250 W

City Midland State TX Zip Code 79701

Purpose of Disbursement
Reimbursement for Travel Meals - M Hamilton

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
08		13		2014

Transaction ID : SB21B.5771

Amount of Each Disbursement this Period

29.71

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Hilton Hotel

Mailing Address 7930 Jones Branch Dr

City McLean State VA Zip Code 22102

Purpose of Disbursement
Travel Accommodations

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
08		02		2014

Transaction ID : SB21B.5772

Amount of Each Disbursement this Period

261.06

Full Name (Last, First, Middle Initial)

C. Hilton Hotel

Mailing Address 7930 Jones Branch Dr

City McLean State VA Zip Code 22102

Purpose of Disbursement
Travel Accommodations

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
08		02		2014

Transaction ID : SB21B.5773

Amount of Each Disbursement this Period

261.06

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

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

522.12

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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

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NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Anne L. Holland

Mailing Address PO Box 2463

City Fort Worth State TX Zip Code 76113

Purpose of Disbursement
Reimbursement for Office Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 25 / 2014

Transaction ID : SB21B.5729

Amount of Each Disbursement this Period

75.75

Full Name (Last, First, Middle Initial)

B. Anne L. Holland

Mailing Address PO Box 2463

City Fort Worth State TX Zip Code 76113

Purpose of Disbursement
Reimbursement for Office Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 25 / 2014

Transaction ID : SB21B.5730

Amount of Each Disbursement this Period

12.22

Full Name (Last, First, Middle Initial)

C. Anne L. Holland

Mailing Address PO Box 2463

City Fort Worth State TX Zip Code 76113

Purpose of Disbursement
Reimbursement for Copy Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 25 / 2014

Transaction ID : SB21B.5731

Amount of Each Disbursement this Period

29.20

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

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

117.17

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Anne L. Holland

Mailing Address PO Box 2463

City Fort Worth State TX Zip Code 76113

Purpose of Disbursement
Reimbursement for Office Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2014

Transaction ID : SB21B.5732

Amount of Each Disbursement this Period

86.59

Full Name (Last, First, Middle Initial)

B. Anne L. Holland

Mailing Address PO Box 2463

City Fort Worth State TX Zip Code 76113

Purpose of Disbursement
Reimbursement for Mileage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2014

Transaction ID : SB21B.5733

Amount of Each Disbursement this Period

492.80

Full Name (Last, First, Middle Initial)

C. i360

Mailing Address PO Box 37046

City Baltimore State MD Zip Code 21297

Purpose of Disbursement
Network Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2014

Transaction ID : SB21B.5774

Amount of Each Disbursement this Period

2750.00

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

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

3329.39

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Intuit Inc.

Mailing Address 2632 Marine Way

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Software License

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 18 / 2014

Transaction ID : SB21B.5775

Amount of Each Disbursement this Period

42.59

Full Name (Last, First, Middle Initial)

B. Intuit Inc.

Mailing Address 2632 Marine Way

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Software License

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2014

Transaction ID : SB21B.5776

Amount of Each Disbursement this Period

42.59

Full Name (Last, First, Middle Initial)

C. Marriott Hotels

Mailing Address 10400 Fernwood Rd

City Bethesda State MD Zip Code 20817

Purpose of Disbursement
Travel Accommodations

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 11 / 2014

Transaction ID : SB21B.5778

Amount of Each Disbursement this Period

1522.19

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

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

1607.37

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Marriott Hotels

Mailing Address 10400 Fernwood Rd

City State Zip Code
Bethesda MD 20817

Purpose of Disbursement
Travel Accommodations

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
08 / 11 / 2014

Transaction ID : SB21B.5779

Amount of Each Disbursement this Period

19.05

Full Name (Last, First, Middle Initial)

B. Jim Miller

Mailing Address 2633 Shoreline Dr

City State Zip Code
Abilene TX 79602

Purpose of Disbursement
Reimbursement for Mileage

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
07 / 09 / 2014

Transaction ID : SB21B.5475

Amount of Each Disbursement this Period

166.88

Full Name (Last, First, Middle Initial)

C. Jim Miller

Mailing Address 2633 Shoreline Dr

City State Zip Code
Abilene TX 79602

Purpose of Disbursement
Accounting Services

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
07 / 09 / 2014

Transaction ID : SB21B.5476

Amount of Each Disbursement this Period

300.00

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

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

485.93

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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Ric Mulligan

Mailing Address 10266 Casa View Dr

City Dallas State TX Zip Code 75228

Purpose of Disbursement
Production Services and Consulting

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		25		2014

Transaction ID : SB21B.5513

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. My Binding

Mailing Address 5500 NE Moore Court

City Hillsboro State OR Zip Code 97124

Purpose of Disbursement
Printing and Binding Services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		18		2014

Transaction ID : SB21B.5780

Amount of Each Disbursement this Period

216.51

Full Name (Last, First, Middle Initial)

C. Mr. Drew Neagle

Mailing Address 5013 Melville Drive

City Midland State TX Zip Code 79705

Purpose of Disbursement
Writer

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2014

Transaction ID : SB21B.5735

Amount of Each Disbursement this Period

500.00

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

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

966.51

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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

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NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address 6600 N Military Trail

City Boca Raton State FL Zip Code 33496

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 11 / 2014

Transaction ID : SB21B.5491

Amount of Each Disbursement this Period

81.44

Full Name (Last, First, Middle Initial)

B. Office Depot

Mailing Address 6600 N Military Trail

City Boca Raton State FL Zip Code 33496

Purpose of Disbursement
Reimbursement for Office Supplies - Anne Holland

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2014

Transaction ID : SB21B.5781

Amount of Each Disbursement this Period

86.59

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Office Depot

Mailing Address 6600 N Military Trail

City Boca Raton State FL Zip Code 33496

Purpose of Disbursement
Reimbursement for Office Supplies - M Hamilton

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2014

Transaction ID : SB21B.5782

Amount of Each Disbursement this Period

18.39

[MEMO ITEM]

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

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

81.44

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address 6600 N Military Trail

City Boca Raton State FL Zip Code 33496

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2014

Transaction ID : SB21B.5490

Amount of Each Disbursement this Period

13.06

Full Name (Last, First, Middle Initial)

B. Office Depot

Mailing Address 6600 N Military Trail

City Boca Raton State FL Zip Code 33496

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2014

Transaction ID : SB21B.5492

Amount of Each Disbursement this Period

1364.33

Full Name (Last, First, Middle Initial)

C. OMNIAMERICAN

Mailing Address 1320 S UNIVERSITY DR
STE 110

City FORT WORTH State TX Zip Code 76107

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 11 / 2014

Transaction ID : SB21B.4346

Amount of Each Disbursement this Period

101.68

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

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

1479.07

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. OMNIAMERICAN

Mailing Address 1320 S UNIVERSITY DR
STE 110

City FORT WORTH State TX Zip Code 76107

Purpose of Disbursement
Bank Fee

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
07 / 29 / 2014

Transaction ID : SB21B.5223

Amount of Each Disbursement this Period

0.24

Full Name (Last, First, Middle Initial)

B. OMNIAMERICAN

Mailing Address 1320 S UNIVERSITY DR
STE 110

City FORT WORTH State TX Zip Code 76107

Purpose of Disbursement
Bank Fee

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
08 / 11 / 2014

Transaction ID : SB21B.5783

Amount of Each Disbursement this Period

42.83

Full Name (Last, First, Middle Initial)

C. OMNIAMERICAN

Mailing Address 1320 S UNIVERSITY DR
STE 110

City FORT WORTH State TX Zip Code 76107

Purpose of Disbursement
Bank Fee

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
08 / 31 / 2014

Transaction ID : SB21B.5225

Amount of Each Disbursement this Period

0.12

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

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

43.19

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. OMNIAMERICAN

Mailing Address 1320 S UNIVERSITY DR
STE 110

City FORT WORTH State TX Zip Code 76107

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 05 / 2014

Transaction ID : SB21B.5784

Amount of Each Disbursement this Period

44.46

Full Name (Last, First, Middle Initial)

B. One Degree LLC

Mailing Address 6911 Marina Shores Ct

City Arlington State TX Zip Code 77016

Purpose of Disbursement
Media Consulting and Broadcast Talent

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2014

Transaction ID : SB21B.5531

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

C. One Degree LLC

Mailing Address 6911 Marina Shores Ct

City Arlington State TX Zip Code 77016

Purpose of Disbursement
Media Consulting and Broadcast Talent

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2014

Transaction ID : SB21B.5544

Amount of Each Disbursement this Period

6000.00

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

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

12044.46

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. One Degree LLC

Mailing Address 6911 Marina Shores Ct

City State Zip Code
Arlington TX 77016

Purpose of Disbursement
Media Consulting and Broadcast Talent

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.5545**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. One Degree LLC

Mailing Address 6911 Marina Shores Ct

City State Zip Code
Arlington TX 77016

Purpose of Disbursement
Media Consulting and Broadcast Talent

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.5546**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. One Degree LLC

Mailing Address 6911 Marina Shores Ct

City State Zip Code
Arlington TX 77016

Purpose of Disbursement
Consulting Travel Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.5785**

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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. One Degree LLC

Mailing Address 6911 Marina Shores Ct

City State Zip Code
Arlington TX 77016

Purpose of Disbursement
Media Consulting and Broadcast Talent

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
08 / 29 / 2014

Transaction ID : **SB21B.5547**

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

B. One Degree LLC

Mailing Address 6911 Marina Shores Ct

City State Zip Code
Arlington TX 77016

Purpose of Disbursement
Printing Expense

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
09 / 02 / 2014

Transaction ID : **SB21B.5786**

Amount of Each Disbursement this Period

124.45

Full Name (Last, First, Middle Initial)

C. One Degree LLC

Mailing Address 6911 Marina Shores Ct

City State Zip Code
Arlington TX 77016

Purpose of Disbursement
Production Equipment

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
09 / 02 / 2014

Transaction ID : **SB21B.5787**

Amount of Each Disbursement this Period

71.96

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

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

6196.41

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

Use separate schedule(s)
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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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. One Degree LLC

Mailing Address 6911 Marina Shores Ct

City State Zip Code
Arlington TX 77016

Purpose of Disbursement
Media Consulting and Broadcast Talent

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5548

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. One Degree LLC

Mailing Address 6911 Marina Shores Ct

City State Zip Code
Arlington TX 77016

Purpose of Disbursement
Consulting Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5788

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. One Degree LLC

Mailing Address 6911 Marina Shores Ct

City State Zip Code
Arlington TX 77016

Purpose of Disbursement
Media Consulting and Broadcast Talent

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5535

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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Patrick Davis Consulting LLC

Mailing Address 5160 Hearthstone Ln

City Colorado Springs State CO Zip Code 80919

Purpose of Disbursement
Political and Strategic Consulting

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2014

Transaction ID : SB21B.4364

Amount of Each Disbursement this Period

7500.00

Category/Type

Full Name (Last, First, Middle Initial)

B. Patrick Davis Consulting LLC

Mailing Address 5160 Hearthstone Ln

City Colorado Springs State CO Zip Code 80919

Purpose of Disbursement
Political and Strategic Consulting

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 09 / 2014

Transaction ID : SB21B.5499

Amount of Each Disbursement this Period

2643.97

Category/Type

Full Name (Last, First, Middle Initial)

C. Patrick Davis Consulting LLC

Mailing Address 5160 Hearthstone Ln

City Colorado Springs State CO Zip Code 80919

Purpose of Disbursement
Political and Strategic Consulting

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 09 / 2014

Transaction ID : SB21B.5500

Amount of Each Disbursement this Period

890.81

Category/Type

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

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

11034.78

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Patrick Davis Consulting LLC

Mailing Address 5160 Hearthstone Ln

City Colorado Springs State CO Zip Code 80919

Purpose of Disbursement
Expenses for Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 14 / 2014

Transaction ID : **SB21B.5497**

Amount of Each Disbursement this Period

907.02

Full Name (Last, First, Middle Initial)

B. Patrick Davis Consulting LLC

Mailing Address 5160 Hearthstone Ln

City Colorado Springs State CO Zip Code 80919

Purpose of Disbursement
Political and 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
07 / 23 / 2014

Transaction ID : **SB21B.5501**

Amount of Each Disbursement this Period

18000.00

Full Name (Last, First, Middle Initial)

C. Patrick Davis Consulting LLC

Mailing Address 5160 Hearthstone Ln

City Colorado Springs State CO Zip Code 80919

Purpose of Disbursement
Political and 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
08 / 12 / 2014

Transaction ID : **SB21B.5502**

Amount of Each Disbursement this Period

18000.00

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

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

36907.02

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Patrick Davis Consulting LLC

Mailing Address 5160 Hearthstone Ln

City Colorado Springs State CO Zip Code 80919

Purpose of Disbursement
Political and 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
08 / 12 / 2014

Transaction ID : SB21B.5504

Amount of Each Disbursement this Period

681.92

Full Name (Last, First, Middle Initial)

B. Patrick Davis Consulting LLC

Mailing Address 5160 Hearthstone Ln

City Colorado Springs State CO Zip Code 80919

Purpose of Disbursement
Political and 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
08 / 19 / 2014

Transaction ID : SB21B.5503

Amount of Each Disbursement this Period

1318.15

Full Name (Last, First, Middle Initial)

C. Patrick Davis Consulting LLC

Mailing Address 5160 Hearthstone Ln

City Colorado Springs State CO Zip Code 80919

Purpose of Disbursement
Political and 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
09 / 04 / 2014

Transaction ID : SB21B.5505

Amount of Each Disbursement this Period

18000.00

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

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

20000.07

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. PERSON TO PERSON PAC

Mailing Address PO BOX 49336

City COLORADO SPRINGS State CO Zip Code 80494

Purpose of Disbursement
Management Services Fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2014

Transaction ID : SB21B.4616

Amount of Each Disbursement this Period

49500.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. PERSON TO PERSON PAC

Mailing Address PO BOX 49336

City COLORADO SPRINGS State CO Zip Code 80494

Purpose of Disbursement
Management Services Fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2014

Transaction ID : SB21B.5722

Amount of Each Disbursement this Period

79997.06

Category/
Type

Full Name (Last, First, Middle Initial)

C. Razor Advertising & Interactive

Mailing Address 1128 Nighthawk Rd

City Fort Worth State TX Zip Code 76108

Purpose of Disbursement
Design and Graphics Services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 09 / 2014

Transaction ID : SB21B.5514

Amount of Each Disbursement this Period

450.00

Category/
Type

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

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

129947.06

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Serendipitous Films Inc.

Mailing Address 6125 Airport Freeway
Ste 211

City Fort Worth State TX Zip Code 76117

Purpose of Disbursement
Video Production Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : SB21B.5789

Amount of Each Disbursement this Period

450.00

Full Name (Last, First, Middle Initial)

B. Serendipitous Films Inc.

Mailing Address 6125 Airport Freeway
Ste 211

City Fort Worth State TX Zip Code 76117

Purpose of Disbursement
Video Production Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 19 / 2014

Transaction ID : SB21B.5790

Amount of Each Disbursement this Period

3600.00

Full Name (Last, First, Middle Initial)

C. Serendipitous Films Inc.

Mailing Address 6125 Airport Freeway
Ste 211

City Fort Worth State TX Zip Code 76117

Purpose of Disbursement
Video Production Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 28 / 2014

Transaction ID : SB21B.5791

Amount of Each Disbursement this Period

750.00

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

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

4800.00

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address PO Box 36647-1CR

City State Zip Code
Dallas TX 75235

Purpose of Disbursement
In-kind - Airfare for Presentation K. Davis

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
07		18		2014

Transaction ID : SB21B.5124

Amount of Each Disbursement this Period

320.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Square Inc.

Mailing Address 1455 Market Street
Ste 600

City State Zip Code
San Francisco CA 94103

Purpose of Disbursement
Merchant Fees

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
09		30		2014

Transaction ID : SB21B.4324

Amount of Each Disbursement this Period

12.85

Full Name (Last, First, Middle Initial)

C. Staples

Mailing Address 500 Staples Dr

City State Zip Code
Farmingham MA 01702

Purpose of Disbursement
Office Supplies

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
07		31		2014

Transaction ID : SB21B.5435

Amount of Each Disbursement this Period

284.52

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

297.37

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

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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

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NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)

A. Strategic Media 21

Full Name (Last, First, Middle Initial)

Mailing Address 560 S. Winchester Blvd
Ste 500

City San Jose State CA Zip Code 95128

Purpose of Disbursement Social Media Consulting and Management

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 09 / 2014

Transaction ID : SB21B.5506

Amount of Each Disbursement this Period
51000.00

B. Strategic Media 21

Full Name (Last, First, Middle Initial)

Mailing Address 560 S. Winchester Blvd
Ste 500

City San Jose State CA Zip Code 95128

Purpose of Disbursement Social Media Consulting and Management

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 01 / 2014

Transaction ID : SB21B.5584

Amount of Each Disbursement this Period
10000.00

C. Strategic Media 21

Full Name (Last, First, Middle Initial)

Mailing Address 560 S. Winchester Blvd
Ste 500

City San Jose State CA Zip Code 95128

Purpose of Disbursement Social Media Consulting and Management

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 11 / 2014

Transaction ID : SB21B.5585

Amount of Each Disbursement this Period
122000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶ 183000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Strategic Media 21

Mailing Address 560 S. Winchester Blvd
Ste 500

City San Jose State CA Zip Code 95128

Purpose of Disbursement
Social Media Consulting and Management

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
08 / 19 / 2014

Transaction ID : **SB21B.5586**

Amount of Each Disbursement this Period

118000.00

Full Name (Last, First, Middle Initial)

B. Strategic Media 21

Mailing Address 560 S. Winchester Blvd
Ste 500

City San Jose State CA Zip Code 95128

Purpose of Disbursement
Social Media Consulting and Management

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
09 / 08 / 2014

Transaction ID : **SB21B.5724**

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

C. Strategic Media 21

Mailing Address 560 S. Winchester Blvd
Ste 500

City San Jose State CA Zip Code 95128

Purpose of Disbursement
Social Media Consulting and Management

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
09 / 29 / 2014

Transaction ID : **SB21B.5723**

Amount of Each Disbursement this Period

10000.00

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

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

138000.00

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Target

Mailing Address 1000 Nicollet Mall

City Minneapolis State MN Zip Code 55402

Purpose of Disbursement
Reimbursement for Office Supplies

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
0	8		2	5		2	0	1	4

Transaction ID : SB21B.5792

Amount of Each Disbursement this Period

7	5	.	7	5
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. The Fort Worth Club

Mailing Address PO Box 961094

City Fort Worth State TX Zip Code 76161

Purpose of Disbursement
F&B for Event

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
0	8		1	2		2	0	1	4

Transaction ID : SB21B.5793

Amount of Each Disbursement this Period

5	1	4	.	2	8
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Travelocity USA

Mailing Address 3150 Sabre Dr

City Southlake State TX Zip Code 76092

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

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	1	4

Transaction ID : SB21B.5794

Amount of Each Disbursement this Period

4	0	3	.	4	8
---	---	---	---	---	---

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

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

9	1	7	.	7	6
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9	1	7	.	7	6
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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

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NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. Travelocity USA

Mailing Address 3150 Sabre Dr

City Southlake State TX Zip Code 76092

Purpose of Disbursement
In-kind - Airfare for Conference K. Davis

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
10			21			2014			

Transaction ID : SB21B.5125

Amount of Each Disbursement this Period

783.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Travelocity USA

Mailing Address 3150 Sabre Dr

City Southlake State TX Zip Code 76092

Purpose of Disbursement
In-kind - Airfare for Conference

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
10			22			2014			

Transaction ID : SB21B.5126

Amount of Each Disbursement this Period

1116.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606

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

M	M	/	D	D	/	Y	Y	Y	Y
08			05			2014			

Transaction ID : SB21B.5795

Amount of Each Disbursement this Period

301.60

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

301.60

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

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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

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NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 475 Le'Fant Plz SW

City Washington State DC Zip Code 20260

Purpose of Disbursement
Reimbursement for Office Supplies - A Holland

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	25	/	2014

Transaction ID : SB21B.5796

Amount of Each Disbursement this Period

12.22

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US Treasury

Mailing Address 1500 Pennsylvania Ave NW

City Washington State DC Zip Code 20220

Purpose of Disbursement
Tax Payments

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	01	/	2014

Transaction ID : SB21B.5532

Amount of Each Disbursement this Period

688.50

Full Name (Last, First, Middle Initial)

C. US Treasury

Mailing Address 1500 Pennsylvania Ave NW

City Washington State DC Zip Code 20220

Purpose of Disbursement
Tax Payments

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	01	/	2014

Transaction ID : SB21B.5572

Amount of Each Disbursement this Period

546.00

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

1234.50

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

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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

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NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. US Treasury

Mailing Address 1500 Pennsylvania Ave NW

City Washington State DC Zip Code 20220

Purpose of Disbursement
Tax Payments

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2014

Transaction ID : SB21B.5573

Amount of Each Disbursement this Period

219.00

Full Name (Last, First, Middle Initial)

B. US Treasury

Mailing Address 1500 Pennsylvania Ave NW

City Washington State DC Zip Code 20220

Purpose of Disbursement
Tax Payments

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2014

Transaction ID : SB21B.5560

Amount of Each Disbursement this Period

688.50

Full Name (Last, First, Middle Initial)

C. US Treasury

Mailing Address 1500 Pennsylvania Ave NW

City Washington State DC Zip Code 20220

Purpose of Disbursement
Tax Payments

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2014

Transaction ID : SB21B.5574

Amount of Each Disbursement this Period

459.00

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

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

1366.50

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. US Treasury

Mailing Address 1500 Pennsylvania Ave NW

City Washington State DC Zip Code 20220

Purpose of Disbursement
Tax Payments

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2014

Transaction ID : **SB21B.5575**

Amount of Each Disbursement this Period

219.00

Full Name (Last, First, Middle Initial)

B. US Treasury

Mailing Address 1500 Pennsylvania Ave NW

City Washington State DC Zip Code 20220

Purpose of Disbursement
Tax Payments

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 30 / 2014

Transaction ID : **SB21B.5138**

Amount of Each Disbursement this Period

1.15

Full Name (Last, First, Middle Initial)

C. US Treasury

Mailing Address 1500 Pennsylvania Ave NW

City Washington State DC Zip Code 20220

Purpose of Disbursement
Tax Payments

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : **SB21B.5576**

Amount of Each Disbursement this Period

213.00

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

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

433.15

**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

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NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. US Treasury

Mailing Address 1500 Pennsylvania Ave NW

City Washington State DC Zip Code 20220

Purpose of Disbursement
Tax Payments

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : SB21B.5578

Amount of Each Disbursement this Period

688.50

Full Name (Last, First, Middle Initial)

B. US Treasury

Mailing Address 1500 Pennsylvania Ave NW

City Washington State DC Zip Code 20220

Purpose of Disbursement
Tax Payments

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : SB21B.5579

Amount of Each Disbursement this Period

459.00

Full Name (Last, First, Middle Initial)

C. US Treasury

Mailing Address 1500 Pennsylvania Ave NW

City Washington State DC Zip Code 20220

Purpose of Disbursement
Tax Payments

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2014

Transaction ID : SB21B.5562

Amount of Each Disbursement this Period

247.26

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

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

1394.76

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. US Treasury

Mailing Address 1500 Pennsylvania Ave NW

City Washington State DC Zip Code 20220

Purpose of Disbursement
Tax Payments

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 29 / 2014

Transaction ID : SB21B.5139

Amount of Each Disbursement this Period

1.59

Full Name (Last, First, Middle Initial)

B. US Treasury

Mailing Address 1500 Pennsylvania Ave NW

City Washington State DC Zip Code 20220

Purpose of Disbursement
Tax Payments

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 29 / 2014

Transaction ID : SB21B.5563

Amount of Each Disbursement this Period

153.00

Full Name (Last, First, Middle Initial)

C. US Treasury

Mailing Address 1500 Pennsylvania Ave NW

City Washington State DC Zip Code 20220

Purpose of Disbursement
Tax Payments

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 15 / 2014

Transaction ID : SB21B.5537

Amount of Each Disbursement this Period

156.34

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

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

310.93

**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)
VOTE 2 REDUCE DEBT (V2RD)

Full Name (Last, First, Middle Initial)

A. US Treasury

Mailing Address 1500 Pennsylvania Ave NW

City Washington State DC Zip Code 20220

Purpose of Disbursement
Tax Payments

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2014

Transaction ID : SB21B.5140

Amount of Each Disbursement this Period

0.99

Full Name (Last, First, Middle Initial)

B. US Treasury

Mailing Address 1500 Pennsylvania Ave NW

City Washington State DC Zip Code 20220

Purpose of Disbursement
Tax Payments

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2014

Transaction ID : SB21B.5534

Amount of Each Disbursement this Period

168.30

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

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

169.29

787963.74

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 71 OF 165
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Calder Group LLC	Nature of Debt (Purpose): Media Election Consulting
Mailing Address PO Box 552	
City State Zip Code Portland MI 48875	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.6551	
Amount Incurred This Period 7500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ephraim Froelich	Nature of Debt (Purpose): Media Election Consulting
Mailing Address 1785 Evergreen Ave	
City State Zip Code Juneau AK 99801	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.6548	
Amount Incurred This Period 7500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Matt Mercer	Nature of Debt (Purpose): Media Election Consulting
Mailing Address PO Box 612	
City State Zip Code Madison NC 27025	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.6544	
Amount Incurred This Period 7500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7500.00

1) SUBTOTALS This Period This Page (optional)..... ▶	22500.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

: 97 `A =G79 @ @ B9CI G`H9LH`F9 @ H98 `HC `5 `F9DCFH`ZG7 <98I @ `CF `H9A =N5 HCB

Form/Schedule: SD10

Transaction ID : SD10.6551

The entry is not in fact for a debt or obligation outstanding as of the closing date of Oct Report within the meaning of 11 CFR 104.11. Transaction appears as a work around for the functional limitations of the FEC Filing Software (FFS) to clarify the memo entry on the original filed report and merely indicates that a portion of the total cost disclosed on the related 24/48 Hour Notice filed during the Oct Report's reporting period was paid after the closing date of the report, once hours of service had been delivered to the committee by the vendor and the payment was due and owing. The actual date of the payment of the obligation cannot be used for such a Sch D entry if it should appear on a report filed before such obligation is due and owing because of the limitations in the FFS functionality; this transaction is dated according to the dissemination date of the related Sch E transaction. 24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948735.

Form/Schedule: SD10

Transaction ID: SD10.6548

The entry is not in fact for a debt or obligation outstanding as of the closing date of Oct Report within the meaning of 11 CFR 104.11. Transaction appears as a work around for the functional limitations of the FEC Filing Software (FFS) to clarify the memo entry on the original filed report and merely indicates that a portion of the total cost disclosed on the related 24/48 Hour Notice filed during the Oct Report's reporting period was paid after the closing date of the report, once hours of service had been delivered to the committee by the vendor and the payment was due and owing. The actual date of the payment of the obligation cannot be used for such a Sch D entry if it should appear on a report filed before such obligation is due and owing because of the limitations in the FFS functionality; this transaction is dated according to the dissemination date of the related Sch E transaction. 24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948730. The original Notice was later amended by report ID FEC-949510 filed on 8/30/2014 for reasons unrelated to this transactions.

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

Form/Schedule: SD10

Transaction ID : SD10.6544

The entry is not in fact for a debt or obligation outstanding as of the closing date of Oct Report within the meaning of 11 CFR 104.11. Transaction appears as a work around for the functional limitations of the FEC Filing Software (FFS) to clarify the memo entry on the original filed report and merely indicates that a portion of the total cost disclosed on the related 24/48 Hour Notice filed during the Oct Report's reporting period was paid after the closing date of the report, once hours of service had been delivered to the committee by the vendor and the payment was due and owing. The actual date of the payment of the obligation cannot be used for such a Sch D entry if it should appear on a report filed before such obligation is due and owing because of the limitations in the FFS functionality; this transaction is dated according to the dissemination date of the related Sch E transaction. 24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948736 and the clerical error for the dissemination date was corrected by the amended Notice ID FEC-949507 filed on 8/30.

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 74 OF 165
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Peak Political Solutions	Nature of Debt (Purpose): Media Election Consulting
Mailing Address 9625 Blue Grass Place	
City State Zip Code Colorado Springs CO 80925	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.6557	
Amount Incurred This Period 7500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hunter Pickels	Nature of Debt (Purpose): Media Election Consulting
Mailing Address 6536 LaSalle Ave	
City State Zip Code Baton Rouge LA 70806	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.6546	
Amount Incurred This Period 7500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ryan Rhodes	Nature of Debt (Purpose): Media Election Consulting
Mailing Address 537 28th St	
City State Zip Code West Des Moines IA 50265	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.6554	
Amount Incurred This Period 7500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7500.00

1) SUBTOTALS This Period This Page (optional)..... ▶	22500.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

: 97 `A =G7 9 @ @ B9 CI G`H9 LH`F9 @ H98 `HC `5 `F9 DCF HZ G7 <98 I @ `CF `H9 A =N5 HCB

Form/Schedule: SD10

Transaction ID : SD10.6557

The entry is not in fact for a debt or obligation outstanding as of the closing date of Oct Report within the meaning of 11 CFR 104.11. Transaction appears as a work around for the functional limitations of the FEC Filing Software (FFS) to clarify the memo entry on the original filed report and merely indicates that a portion of the total cost disclosed on the related 24/48 Hour Notice filed during the Oct Report's reporting period was paid after the closing date of the report, once hours of service had been delivered to the committee by the vendor and the payment was due and owing. The actual date of the payment of the obligation cannot be used for such a Sch D entry if it should appear on a report filed before such obligation is due and owing because of the limitations in the FFS functionality; this transaction is dated according to the dissemination date of the related Sch E transaction. 24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948732.

Form/Schedule: SD10

Transaction ID: SD10.6546

The entry is not in fact for a debt or obligation outstanding as of the closing date of Oct Report within the meaning of 11 CFR 104.11. Transaction appears as a work around for the functional limitations of the FEC Filing Software (FFS) to clarify the memo entry on the original filed report and merely indicates that a portion of the total cost disclosed on the related 24/48 Hour Notice filed during the Oct Report's reporting period was paid after the closing date of the report, once hours of service had been delivered to the committee by the vendor and the payment was due and owing. The actual date of the payment of the obligation cannot be used for such a Sch D entry if it should appear on a report filed before such obligation is due and owing because of the limitations in the FFS functionality; this transaction is dated according to the dissemination date of the related Sch E transaction. 24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948734 reporting lump sum estimated due to vendor.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`-H9A-N5H-CB

Form/Schedule: SD10

Transaction ID : SD10.6554

The entry is not in fact for a debt or obligation outstanding as of the closing date of Oct Report within the meaning of 11 CFR 104.11. Transaction appears as a work around for the functional limitations of the FEC Filing Software (FFS) to clarify the memo entry on the original filed report and merely indicates that a portion of the total cost disclosed on the related 24/48 Hour Notice filed during the Oct Report's reporting period was paid after the closing date of the report, once hours of service had been delivered to the committee by the vendor and the payment was due and owing. The actual date of the payment of the obligation cannot be used for such a Sch D entry if it should appear on a report filed before such obligation is due and owing because of the limitations in the FFS functionality; this transaction is dated according to the dissemination date of the related Sch E transaction. 24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948733. The original Notice was later amended by report ID FEC-949508 filed on 8/30/2014 for reasons unrelated to this transactions.

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 77 OF 165
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jebb Young	Nature of Debt (Purpose): Media Election Consulting
Mailing Address 4200 Calion Hwy	
City State Zip Code El Dorado AR 71730	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.6555	
Amount Incurred This Period <input type="text" value="7500.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="7500.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="7500.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="52500.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="52500.00"/>

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`-H9A-N5H-CB

Form/Schedule: SD10

Transaction ID : SD10.6555

The entry is not in fact for a debt or obligation outstanding as of the closing date of Oct Report within the meaning of 11 CFR 104.11. Transaction appears as a work around for the functional limitations of the FEC Filing Software (FFS) to clarify the memo entry on the original filed report and merely indicates that a portion of the total cost disclosed on the related 24/48 Hour Notice filed during the Oct Report's reporting period was paid after the closing date of the report, once hours of service had been delivered to the committee by the vendor and the payment was due and owing. The actual date of the payment of the obligation cannot be used for such a Sch D entry if it should appear on a report filed before such obligation is due and owing because of the limitations in the FFS functionality; this transaction is dated according to the dissemination date of the related Sch E transaction. 24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948731. The original Notice was later amended by report ID FEC-949509 filed on 8/30/2014 for reasons unrelated to this transactions.

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 MM / DD / YYYY	

Full Name of Payee Anchorage Buildings LLC	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 24 / 2014
Mailing Address 333 West 7th Ave Ste 700	Amount 4200.00
City State Zip Code Anchorage AK 99501	Transaction ID : SE.4494 Date of Disbursement or Obligation MM / DD / YYYY 08 / 28 / 2014
Purpose of Expenditure Office Space Rental	Category/Type
Name of Federal Candidate DAN SULLIVAN	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK
57275.35	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Atterra 25	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 24 / 2014
Mailing Address 526 39th St	Amount 2560.00
City State Zip Code Des Moines IA 50312	Transaction ID : SE.4472 Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014
Purpose of Expenditure Office Space Rental	Category/Type
Name of Federal Candidate JONI K ERNST	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA
82730.59	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	6760.00
(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.

Mr. KENNETH W. DAVIS JR.

Signature _____ [Electronically Filed] Date MM / DD / YYYY
01 / 30 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 Calder Group LLC [MEMO ITEM]	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 24 / 2014
Mailing Address PO Box 552	Amount 7500.00
City Portland State MI Zip Code 48875	Transaction ID : SE.5260
Purpose of Expenditure Media Election Consulting	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate TERRI LYNN LAND	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MI</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) ▶ _____
	0.00

Full Name of Payee Calder Group LLC	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 24 / 2014
Mailing Address PO Box 552	Amount 7500.00
City Portland State MI Zip Code 48875	Transaction ID : SE.4463
Purpose of Expenditure Media Election Consulting	Date of Disbursement or Obligation MM / DD / YYYY 08 / 22 / 2014
Name of Federal Candidate TERRI LYNN LAND	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MI</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) ▶ _____
	53075.35

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	7500.00
(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.

Mr. KENNETH W. DAVIS JR.

Signature _____ [Electronically Filed] Date **01 / 30 / 2015**

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

Form/Schedule: SE

Transaction ID : SE.5260

24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948735 reporting lump sum estimated due to vendor.

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 Calder Group LLC	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 24 / 2014
Mailing Address PO Box 552	Amount 7500.00
City Portland	State MI
Zip Code 48875	Transaction ID : SE.4465
Purpose of Expenditure Media Election Consulting	Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014
Name of Federal Candidate TERRI LYNN LAND	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MI</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) ▶ _____
105503.93	

Full Name of Payee ccAdvertising	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 24 / 2014
Mailing Address 14001C Saint German Dr Ste 353	Amount 1071.42
City Centerville	State VA
Zip Code 20121	Transaction ID : SE.4457
Purpose of Expenditure Voter ID Call Centers	Date of Disbursement or Obligation MM / DD / YYYY 08 / 12 / 2014
Name of Federal Candidate THOM R TILLIS	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</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) ▶ _____
5574.93	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	8571.42
(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.

Mr. KENNETH W. DAVIS JR.

Signature _____ [Electronically Filed] Date **01 / 30 / 2015**

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : SE.4465

24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948735 reporting lump sum estimated due to vendor.

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
ccAdvertising
Mailing Address
14001C Saint German Dr
Ste 353
City
Centerville State
VA Zip Code
20121
Date of Public Distribution/Dissemination
08 / 24 / 2014
Amount
1071.42
Transaction ID : SE.4461
Date of Disbursement or Obligation
08 / 12 / 2014
Purpose of Expenditure
Voter ID Call Centers
Category/Type
Name of Federal Candidate
TERRI LYNN LAND
Support
Office Sought:
Senate State: MI
Calendar Year-To-Date
Per Election for Office Sought
1071.42
Disbursement For:
General 2014

Full Name of Payee
ccAdvertising
Mailing Address
14001C Saint German Dr
Ste 353
City
Centerville State
VA Zip Code
20121
Date of Public Distribution/Dissemination
08 / 24 / 2014
Amount
1071.43
Transaction ID : SE.4474
Date of Disbursement or Obligation
08 / 12 / 2014
Purpose of Expenditure
Voter ID Call Centers
Category/Type
Name of Federal Candidate
JONI K ERNST
Support
Office Sought:
Senate State: IA
Calendar Year-To-Date
Per Election for Office Sought
5574.94
Disbursement For:
General 2014

(a) SUBTOTAL of Itemized Independent Expenditures..... 2142.85
(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.
Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01 / 30 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
ccAdvertising
Mailing Address
14001C Saint German Dr
Ste 353
City
Centerville State
VA Zip Code
20121
Purpose of Expenditure
Voter ID Call Centers
Category/Type
Name of Federal Candidate
CORY GARDNER
Support
Office Sought:
Senate State: CO
Calendar Year-To-Date
Per Election for Office Sought
1071.42

Date of Public Distribution/Dissemination
08 / 24 / 2014
Amount
1071.42
Transaction ID : SE.4476
Date of Disbursement or Obligation
08 / 12 / 2014
Disbursement For:
General
Other (specify)

Full Name of Payee
ccAdvertising
Mailing Address
14001C Saint German Dr
Ste 353
City
Centerville State
VA Zip Code
20121
Purpose of Expenditure
Voter ID Call Centers
Category/Type
Name of Federal Candidate
THOMAS COTTON
Support
Office Sought:
Senate State: AR
Calendar Year-To-Date
Per Election for Office Sought
1071.42

Date of Public Distribution/Dissemination
08 / 24 / 2014
Amount
1071.42
Transaction ID : SE.4482
Date of Disbursement or Obligation
08 / 12 / 2014
Disbursement For:
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 2142.84
(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.
Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01 / 30 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee ccAdvertising	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 24 / 2014
Mailing Address 14001C Saint German Dr Ste 353	Amount 1071.42
City State Zip Code Centerville VA 20121	Transaction ID : SE.4489 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 12 / 2014
Purpose of Expenditure Voter ID Call Centers	Category/Type
Name of Federal Candidate WILLIAM CASSIDY	<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: _____ State: LA
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) _____ 1071.42

Full Name of Payee ccAdvertising	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 24 / 2014
Mailing Address 14001C Saint German Dr Ste 353	Amount 1071.42
City State Zip Code Centerville VA 20121	Transaction ID : SE.4495 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 12 / 2014
Purpose of Expenditure Voter ID Call Centers	Category/Type
Name of Federal Candidate DAN SULLIVAN	<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: _____ State: AK
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) _____ 1071.42

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	2142.84
(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.

Mr. KENNETH W. DAVIS JR.

Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
01 / 30 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee ccAdvertising	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 24 / 2014
Mailing Address 14001C Saint German Dr Ste 353	Amount 30928.58
City State Zip Code Centerville VA 20121	Transaction ID : SE.4459 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 09 / 04 / 2014
Purpose of Expenditure Voter ID Call Centers	Category/Type
Name of Federal Candidate THOM R TILLIS	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
86851.05	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee ccAdvertising	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 24 / 2014
Mailing Address 14001C Saint German Dr Ste 353	Amount 43428.58
City State Zip Code Centerville VA 20121	Transaction ID : SE.4462 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 09 / 04 / 2014
Purpose of Expenditure Voter ID Call Centers	Category/Type
Name of Federal Candidate TERRI LYNN LAND	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI
98003.93	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	74357.16
(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.

Mr. KENNETH W. DAVIS JR.

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
01 / 30 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee ccAdvertising
Mailing Address 14001C Saint German Dr Ste 353
City Centerville State VA Zip Code 20121
Purpose of Expenditure Voter ID Call Centers
Name of Federal Candidate JONI K ERNST
Calendar Year-To-Date Per Election for Office Sought 72670.59
Date of Public Distribution/Dissemination 08/24/2014
Amount 12428.57
Transaction ID : SE.4475
Date of Disbursement or Obligation 09/04/2014
Office Sought: Senate State: IA
Disbursement For: General 2014

Full Name of Payee ccAdvertising
Mailing Address 14001C Saint German Dr Ste 353
City Centerville State VA Zip Code 20121
Purpose of Expenditure Voter ID Call Centers
Name of Federal Candidate CORY GARDNER
Calendar Year-To-Date Per Election for Office Sought 79807.42
Date of Public Distribution/Dissemination 08/24/2014
Amount 18928.58
Transaction ID : SE.4477
Date of Disbursement or Obligation 09/04/2014
Office Sought: Senate State: CO
Disbursement For: General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 31357.15
(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.
Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01/30/2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
ccAdvertising
Mailing Address
14001C Saint German Dr
Ste 353
City
Centerville State
VA Zip Code
20121
Date of Public Distribution/Dissemination
08 / 24 / 2014
Amount
6928.58
Transaction ID : SE.4483
Date of Disbursement or Obligation
09 / 04 / 2014
Purpose of Expenditure
Voter ID Call Centers
Category/Type
Name of Federal Candidate
THOMAS COTTON
Support
Office Sought:
Senate State: AR
Calendar Year-To-Date
Per Election for Office Sought
63409.93
Disbursement For:
General 2014

Full Name of Payee
ccAdvertising
Mailing Address
14001C Saint German Dr
Ste 353
City
Centerville State
VA Zip Code
20121
Date of Public Distribution/Dissemination
08 / 24 / 2014
Amount
13428.58
Transaction ID : SE.4492
Date of Disbursement or Obligation
09 / 04 / 2014
Purpose of Expenditure
Voter ID Call Centers
Category/Type
Name of Federal Candidate
WILLIAM CASSIDY
Support
Office Sought:
Senate State: LA
Calendar Year-To-Date
Per Election for Office Sought
62753.93
Disbursement For:
General 2014

(a) SUBTOTAL of Itemized Independent Expenditures..... 20357.16
(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.
Mr. KENNETH W. DAVIS JR.
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Date 01 / 30 / 2015
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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
ccAdvertising
Mailing Address
14001C Saint German Dr
Ste 353
City
Centerville State
VA Zip Code
20121
Date of Public Distribution/Dissemination
08 / 24 / 2014
Amount
1928.58
Transaction ID : SE.4496
Date of Disbursement or Obligation
09 / 04 / 2014
Purpose of Expenditure
Voter ID Call Centers
Category/Type
Name of Federal Candidate
DAN SULLIVAN
Support
Office Sought:
Senate State: AK
Calendar Year-To-Date
Per Election for Office Sought
59203.93
Disbursement For:
General 2014

Full Name of Payee
ccAdvertising
Mailing Address
14001C Saint German Dr
Ste 353
City
Centerville State
VA Zip Code
20121
Date of Public Distribution/Dissemination
10 / 10 / 2014
Amount
1092.42
Transaction ID : SE.4588
Date of Disbursement or Obligation
09 / 05 / 2014
Purpose of Expenditure
Voter ID Lists
Category/Type
Name of Federal Candidate
DAN SULLIVAN
Support
Office Sought:
Senate State: AK
Calendar Year-To-Date
Per Election for Office Sought
75296.35
Disbursement For:
General 2014

(a) SUBTOTAL of Itemized Independent Expenditures..... 3021.00
(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.
Mr. KENNETH W. DAVIS JR.
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Date 01 / 30 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee ccAdvertising	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014
Mailing Address 14001C Saint German Dr Ste 353	Amount 1076.43
City State Zip Code Centerville VA 20121	Transaction ID : SE.4589 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 09 / 05 / 2014
Purpose of Expenditure Voter ID Lists	Category/Type
Name of Federal Candidate THOMAS COTTON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AR
86986.36	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee ccAdvertising	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014
Mailing Address 14001C Saint German Dr Ste 353	Amount 1171.43
City State Zip Code Centerville VA 20121	Transaction ID : SE.4590 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 09 / 05 / 2014
Purpose of Expenditure Voter ID Lists	Category/Type
Name of Federal Candidate CORY GARDNER	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO
103478.85	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	2247.86
(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.

Mr. KENNETH W. DAVIS JR.

[Electronically Filed]

Signature _____ Date M M M / D D D / Y Y Y Y Y Y
01 / 30 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee ccAdvertising
Mailing Address 14001C Saint German Dr Ste 353
City Centerville State VA Zip Code 20121
Purpose of Expenditure Voter ID Lists
Name of Federal Candidate JONI K ERNST
Office Sought: Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 100752.02
Disbursement For: General 2014

Full Name of Payee ccAdvertising
Mailing Address 14001C Saint German Dr Ste 353
City Centerville State VA Zip Code 20121
Purpose of Expenditure Voter ID Lists
Name of Federal Candidate WILLIAM CASSIDY
Office Sought: Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 83830.36
Disbursement For: General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 9097.86
(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.
Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01 / 30 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee ccAdvertising	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 10 / 2014
Mailing Address 14001C Saint German Dr Ste 353	Amount 1093.93
City State Zip Code Centerville VA 20121	Transaction ID : SE.4594 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 05 / 2014
Purpose of Expenditure Voter ID Lists	Category/Type
Name of Federal Candidate TERRI LYNN LAND	<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"/> District: _____ <input type="checkbox"/> State: MI
Calendar Year-To-Date Per Election for Office Sought 121597.86	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee ccAdvertising	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 10 / 2014
Mailing Address 14001C Saint German Dr Ste 353	Amount 1071.43
City State Zip Code Centerville VA 20121	Transaction ID : SE.4705 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 05 / 2014
Purpose of Expenditure Voter ID Lists	Category/Type
Name of Federal Candidate THOM R TILLIS	<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"/> District: _____ <input type="checkbox"/> State: NC
Calendar Year-To-Date Per Election for Office Sought 110422.48	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	2165.36
(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.

Mr. KENNETH W. DAVIS JR.

Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
01 / 30 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)		FEC IDENTIFICATION NUMBER ▼ C C00563064
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 M M / D D / Y Y Y Y Y Y		

Full Name of Payee Empire Building LLC		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 24 / 2014	
Mailing Address PO Box 8050		Amount 2847.12	
City Greensboro	State NC	Zip Code 27419	Transaction ID : SE.4560
Purpose of Expenditure Office Space Rental		Category/Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 28 / 2014
Name of Federal Candidate THOM R TILLIS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 55922.47		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Marcie Finney		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 13 / 2014	
Mailing Address 2508 College Ave		Amount 571.43	
City Fort Worth	State TX	Zip Code 76110	Transaction ID : SE.4608
Purpose of Expenditure Services for Printing and Design of Door Hanger		Category/Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 08 / 2014
Name of Federal Candidate DAN SULLIVAN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AK</u>
Calendar Year-To-Date Per Election for Office Sought 75867.78		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	3418.55
(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.

Mr. KENNETH W. DAVIS JR.

Signature [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
01 / 30 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Marcie Finney	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 09 / 13 / 2014
Mailing Address 2508 College Ave	Amount 571.43
City State Zip Code Fort Worth TX 76110	Transaction ID : SE.4609 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 09 / 08 / 2014
Purpose of Expenditure Services for Printing and Design of Door Hanger	Category/Type
Name of Federal Candidate THOMAS COTTON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AR
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) ▶ _____
	87557.79

Full Name of Payee Marcie Finney	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 09 / 13 / 2014
Mailing Address 2508 College Ave	Amount 571.43
City State Zip Code Fort Worth TX 76110	Transaction ID : SE.4610 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 09 / 08 / 2014
Purpose of Expenditure Services for Printing and Design of Door Hanger	Category/Type
Name of Federal Candidate CORY GARDNER	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO
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) ▶ _____
	104050.28

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1142.86
(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.

Mr. KENNETH W. DAVIS JR.

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
01 / 30 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Marcie Finney	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 09 / 13 / 2014
Mailing Address 2508 College Ave	Amount 571.43
City Fort Worth State TX Zip Code 76110	Transaction ID : SE.4611 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 09 / 08 / 2014
Purpose of Expenditure Services for Printing and Design of Door Hanger	Category/Type []
Name of Federal Candidate JONI K ERNST	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: IA
Calendar Year-To-Date Per Election for Office Sought 101323.45	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Marcie Finney	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 09 / 13 / 2014
Mailing Address 2508 College Ave	Amount 571.43
City Fort Worth State TX Zip Code 76110	Transaction ID : SE.4612 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 09 / 08 / 2014
Purpose of Expenditure Services for Printing and Design of Door Hanger	Category/Type []
Name of Federal Candidate WILLIAM CASSIDY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: LA
Calendar Year-To-Date Per Election for Office Sought 91901.79	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1142.86
(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.

Mr. KENNETH W. DAVIS JR.

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
01 / 30 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee Marcie Finney	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 13 / 2014
Mailing Address 2508 College Ave	Amount 571.43
City Fort Worth State TX Zip Code 76110	Transaction ID : SE.4613 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 08 / 2014
Purpose of Expenditure Services for Printing and Design of Door Hanger	Category/Type
Name of Federal Candidate TERRI LYNN LAND	<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"/> District: _____ <input type="checkbox"/> State: MI
Calendar Year-To-Date Per Election for Office Sought 122169.29	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Marcie Finney	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 13 / 2014
Mailing Address 2508 College Ave	Amount 571.43
City Fort Worth State TX Zip Code 76110	Transaction ID : SE.4614 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 08 / 2014
Purpose of Expenditure Services for Printing and Design of Door Hanger	Category/Type
Name of Federal Candidate THOM R TILLIS	<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"/> District: _____ <input type="checkbox"/> State: NC
Calendar Year-To-Date Per Election for Office Sought 110993.91	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1142.86
(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.

Mr. KENNETH W. DAVIS JR.

Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
01 / 30 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Forget Properties LLC
Mailing Address
4214 Fleur Dr
Ste 13
City
Des Moines State
IA Zip Code
50321
Purpose of Expenditure
Office Space Rental
Category/Type
Name of Federal Candidate
JONI K ERNST
Support
Office Sought:
House
Senate
State: IA
Calendar Year-To-Date
Per Election for Office Sought
60242.02

Date of Public Distribution/Dissemination
08 / 24 / 2014
Amount
7166.66
Transaction ID : SE.4468
Date of Disbursement or Obligation
08 / 28 / 2014
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Ephraim Froelich
MEMO ITEM
Mailing Address
1785 Evergreen Ave
City
Juneau State
AK Zip Code
99801
Purpose of Expenditure
Media Election Consulting
Category/Type
Name of Federal Candidate
DAN SULLIVAN
Support
Office Sought:
House
Senate
State: AK
Calendar Year-To-Date
Per Election for Office Sought
0.00

Date of Public Distribution/Dissemination
08 / 24 / 2014
Amount
7500.00
Transaction ID : SE.5265
Date of Disbursement or Obligation
Disbursement For:
Primary
General
Other (specify)

Table with 2 columns: Description and Amount. Row (a) SUBTOTAL of Itemized Independent Expenditures: 7166.66. Row (b) SUBTOTAL of Unitemized Independent Expenditures. Row (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.

Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01 / 30 / 2015
Signature

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

Form/Schedule: SE

Transaction ID : SE.5265

24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948730 reporting lump sum estimated due to vendor. The original Notice was later amended by report ID FEC-949510 filed on 8/30/2014 for reasons unrelated to this transactions.

Form/Schedule:

Transaction ID:

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

Form/Schedule: SE

Transaction ID : SE.4497

24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948730 reporting lump sum estimated due to vendor. The original Notice was later amended by report ID FEC-949510 filed on 8/30/2014 for reasons unrelated to this transactions.

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee Matt Mercer [MEMO ITEM]	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 24 / 2014
Mailing Address PO Box 612	Amount 7500.00
City State Zip Code Madison NC 27025	Transaction ID : SE.5271 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure Media Election Consulting	Category/Type
Name of Federal Candidate THOM R TILLIS	<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: _____ State: <u>NC</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) _____ 0.00

Full Name of Payee Matt Mercer	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 24 / 2014
Mailing Address PO Box 612	Amount 7500.00
City State Zip Code Madison NC 27025	Transaction ID : SE.4455 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 22 / 2014
Purpose of Expenditure Media Election Consulting	Category/Type
Name of Federal Candidate THOM R TILLIS	<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: _____ State: <u>NC</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) _____ 53075.35

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	7500.00
(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.

Mr. KENNETH W. DAVIS JR.

Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
01 / 30 / 2015

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

Form/Schedule: SE

Transaction ID : SE.5271

Transaction is revised to correct clerical error in dissemination date from 8/24/2015 to 8/24/2014. 24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948736 reporting lump sum estimated due to vendor and the clerical error for the dissemination date was corrected by the amended Notice ID FEC-949507 filed on 8/30.

Form/Schedule:

Transaction ID:

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

Form/Schedule: SE

Transaction ID : SE.4458

Transaction is revised to correct clerical error in dissemination date from 8/24/2015 to 8/24/2014. 24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948736 reporting lump sum estimated due to vendor and the clerical error for the dissemination date was corrected by the amended Notice ID FEC-949507 filed on 8/30.

Form/Schedule: SE

Transaction ID: SE.4466

Transaction is revised to correct clerical error in dissemination date from 8/24/2015 to 8/24/2014. 24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948735.

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Office Depot
Mailing Address
6600 N Military Trail
City
Boca Raton State
FL Zip Code
33496
Purpose of Expenditure
Supplies for Phone Centers
Category/Type
Name of Federal Candidate
THOM R TILLIS
Support
Office Sought:
Senate State:
NC
Calendar Year-To-Date
Per Election for Office Sought
126578.28

Date of Public Distribution/Dissemination
09 / 18 / 2014
Amount
1298.66
Transaction ID : SE.4604
Date of Disbursement or Obligation
09 / 11 / 2014
Disbursement For:
General
2014

Full Name of Payee
Office Depot
Mailing Address
6600 N Military Trail
City
Boca Raton State
FL Zip Code
33496
Purpose of Expenditure
Supplies for Phone Centers
Category/Type
Name of Federal Candidate
CORY GARDNER
Support
Office Sought:
Senate State:
CO
Calendar Year-To-Date
Per Election for Office Sought
118850.79

Date of Public Distribution/Dissemination
09 / 18 / 2014
Amount
123.76
Transaction ID : SE.5005
Date of Disbursement or Obligation
09 / 11 / 2014
Disbursement For:
General
2014

(a) SUBTOTAL of Itemized Independent Expenditures..... 1422.42
(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.

Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date
01 / 30 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Office Depot
Mailing Address: 6600 N Military Trail
City: Boca Raton, State: FL, Zip Code: 33496
Purpose of Expenditure: Supplies for Phone Centers
Category/Type:
Name of Federal Candidate: THOMAS COTTON
Support: [X] Support, [] Oppose
Office Sought: [] House, [X] Senate, State: AR
Calendar Year-To-Date Per Election for Office Sought: 103345.92
Date of Public Distribution/Dissemination: 09/18/2014
Amount: 466.01
Transaction ID: SE.5006
Date of Disbursement or Obligation: 09/11/2014
Disbursement For: [] Primary, [X] General 2014, [] Other (specify)

Full Name of Payee: Office Depot
Mailing Address: 6600 N Military Trail
City: Boca Raton, State: FL, Zip Code: 33496
Purpose of Expenditure: Supplies for Phone Centers
Category/Type:
Name of Federal Candidate: WILLIAM CASSIDY
Support: [X] Support, [] Oppose
Office Sought: [] House, [X] Senate, State: LA
Calendar Year-To-Date Per Election for Office Sought: 107241.78
Date of Public Distribution/Dissemination: 09/18/2014
Amount: 14.63
Transaction ID: SE.5007
Date of Disbursement or Obligation: 09/11/2014
Disbursement For: [] Primary, [X] General 2014, [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures: 480.64
(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.
Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date: 01/30/2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Office Depot
Mailing Address: 6600 N Military Trail
City: Boca Raton, State: FL, Zip Code: 33496
Purpose of Expenditure: Supplies for Phone Centers
Date of Public Distribution/Dissemination: 09/18/2014
Amount: 12.97
Transaction ID: SE.5009
Date of Disbursement or Obligation: 09/11/2014
Name of Federal Candidate: TERRI LYNN LAND
Support: [X] Support, [] Oppose
Office Sought: [] House, [X] Senate, State: MI
Disbursement For: [] Primary, [X] General, [] Other
Calendar Year-To-Date Per Election for Office Sought: 137013.05

Full Name of Payee: Peak Political Solutions
[MEMO ITEM]
Mailing Address: 9625 Blue Grass Place
City: Colorado Springs, State: CO, Zip Code: 80925
Purpose of Expenditure: Media Election Consulting
Date of Public Distribution/Dissemination: 08/24/2014
Amount: 7500.00
Transaction ID: SE.5262
Date of Disbursement or Obligation:
Name of Federal Candidate: CORY GARDNER
Support: [X] Support, [] Oppose
Office Sought: [] House, [X] Senate, State: CO
Disbursement For: [] Primary, [X] General, [] Other
Calendar Year-To-Date Per Election for Office Sought: 0.00

(a) SUBTOTAL of Itemized Independent Expenditures..... 12.97
(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.
Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01/30/2015
Signature

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : SE.5262

24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948732 reporting lump sum estimated due to vendor.

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Peak Political Solutions
Mailing Address: 9625 Blue Grass Place
City: Colorado Springs, State: CO, Zip Code: 80925
Purpose of Expenditure: Media Election Consulting
Category/Type:
Name of Federal Candidate: CORY GARDNER (Support)
Office Sought: Senate, State: CO
Calendar Year-To-Date Per Election for Office Sought: 57578.84
Date of Public Distribution/Dissemination: 08/24/2014
Amount: 7500.00
Transaction ID: SE.4479
Date of Disbursement or Obligation: 08/22/2014
Disbursement For: General 2014

Full Name of Payee: Peak Political Solutions
Mailing Address: 9625 Blue Grass Place
City: Colorado Springs, State: CO, Zip Code: 80925
Purpose of Expenditure: Media Election Consulting
Category/Type:
Name of Federal Candidate: CORY GARDNER (Support)
Office Sought: Senate, State: CO
Calendar Year-To-Date Per Election for Office Sought: 87307.42
Date of Public Distribution/Dissemination: 08/24/2014
Amount: 7500.00
Transaction ID: SE.4478
Date of Disbursement or Obligation: 09/05/2014
Disbursement For: General 2014

(a) SUBTOTAL of Itemized Independent Expenditures: 15000.00
(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.
Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date: 01/30/2015
Signature

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : SE.4478

24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948732 reporting lump sum estimated due to vendor.

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee PERSON TO PERSON PAC	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014
Mailing Address PO BOX 49336	Amount 5555.55
City COLORADO SPRINGS	State CO
Zip Code 80494	Transaction ID : SE.5272
Purpose of Expenditure National Field Operations Services and Staff	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 19 / 2014
Name of Federal Candidate DAN SULLIVAN	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AK</u>
Calendar Year-To-Date Per Election for Office Sought 11130.48	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee PERSON TO PERSON PAC	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014
Mailing Address PO BOX 49336	Amount 5555.55
City COLORADO SPRINGS	State CO
Zip Code 80494	Transaction ID : SE.5273
Purpose of Expenditure National Field Operations Services and Staff	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 19 / 2014
Name of Federal Candidate THOMAS COTTON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AR</u>
Calendar Year-To-Date Per Election for Office Sought 11130.48	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	11111.10
(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.

Mr. KENNETH W. DAVIS JR.

[Electronically Filed]

Date M M M / D D D / Y Y Y Y Y Y
01 / 30 / 2015

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
PERSON TO PERSON PAC
Mailing Address PO BOX 49336
City COLORADO SPRINGS State CO Zip Code 80494
Purpose of Expenditure National Field Operations Services and Staff
Name of Federal Candidate CORY GARDNER
Calendar Year-To-Date Per Election for Office Sought 15633.97
Date of Public Distribution/Dissemination 10/10/2014
Amount 5555.55
Transaction ID : SE.5274
Date of Disbursement or Obligation 08/19/2014
Office Sought: Senate State: CO
Disbursement For: General 2014

Full Name of Payee
PERSON TO PERSON PAC
Mailing Address PO BOX 49336
City COLORADO SPRINGS State CO Zip Code 80494
Purpose of Expenditure National Field Operations Services and Staff
Name of Federal Candidate JONI K ERNST
Calendar Year-To-Date Per Election for Office Sought 11130.49
Date of Public Distribution/Dissemination 10/10/2014
Amount 5555.55
Transaction ID : SE.5275
Date of Disbursement or Obligation 08/19/2014
Office Sought: Senate State: IA
Disbursement For: General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 11111.10
(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.
Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01/30/2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
PERSON TO PERSON PAC
Mailing Address PO BOX 49336
City COLORADO SPRINGS State CO Zip Code 80494
Purpose of Expenditure National Field Operations Services and Staff
Name of Federal Candidate WILLIAM CASSIDY
Calendar Year-To-Date Per Election for Office Sought 11130.48

Date of Public Distribution/Dissemination 10 / 10 / 2014
Amount 5555.55
Transaction ID : SE.5276
Date of Disbursement or Obligation 08 / 19 / 2014
Office Sought: House District: LA
Disbursement For: Primary General 2014

Full Name of Payee
PERSON TO PERSON PAC
Mailing Address PO BOX 49336
City COLORADO SPRINGS State CO Zip Code 80494
Purpose of Expenditure National Field Operations Services and Staff
Name of Federal Candidate THOM R TILLIS
Calendar Year-To-Date Per Election for Office Sought 11130.48

Date of Public Distribution/Dissemination 10 / 10 / 2014
Amount 5555.55
Transaction ID : SE.5277
Date of Disbursement or Obligation 08 / 19 / 2014
Office Sought: House District: NC
Disbursement For: Primary General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 11111.10
(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.
Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01 / 30 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: PERSON TO PERSON PAC
Mailing Address: PO BOX 49336
City: COLORADO SPRINGS, State: CO, Zip Code: 80494
Purpose of Expenditure: National Field Operations Services and Staff
Category/Type:
Name of Federal Candidate: MARK BEGICH, Support: [], Oppose: [X]
Office Sought: [] President, [X] Senate, State: AK
Calendar Year-To-Date Per Election for Office Sought: 16686.03
Disbursement For: [] Primary, [X] General 2014

Full Name of Payee: PERSON TO PERSON PAC
Mailing Address: PO BOX 49336
City: COLORADO SPRINGS, State: CO, Zip Code: 80494
Purpose of Expenditure: National Field Operations Services and Staff
Category/Type:
Name of Federal Candidate: MARK LUNSFORD PRYOR, Support: [], Oppose: [X]
Office Sought: [] President, [X] Senate, State: AR
Calendar Year-To-Date Per Election for Office Sought: 16686.03
Disbursement For: [] Primary, [X] General 2014

(a) SUBTOTAL of Itemized Independent Expenditures: 11111.10
(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.

Mr. KENNETH W. DAVIS JR. [Electronically Filed] Date 01 / 30 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)		FEC IDENTIFICATION NUMBER ▼ C C00563064	
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 PERSON TO PERSON PAC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2014	
Mailing Address PO BOX 49336		Amount 5555.55	
City COLORADO SPRINGS	State CO	Zip Code 80494	Transaction ID : SE.5280
Purpose of Expenditure National Field Operations Services and Staff		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 08 / 19 / 2014
Name of Federal Candidate MARK E UDALL		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought		21189.52	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee PERSON TO PERSON PAC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2014	
Mailing Address PO BOX 49336		Amount 5555.55	
City COLORADO SPRINGS	State CO	Zip Code 80494	Transaction ID : SE.5281
Purpose of Expenditure National Field Operations Services and Staff		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 08 / 19 / 2014
Name of Federal Candidate BRUCE L BRALEY		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		16686.04	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	11111.10
(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.

Mr. KENNETH W. DAVIS JR.

Signature _____ Date **01 / 30 / 2015**

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee PERSON TO PERSON PAC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 10 / 2014
Mailing Address PO BOX 49336	Amount 5555.55
City State Zip Code COLORADO SPRINGS CO 80494	Transaction ID : SE.5282 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 19 / 2014
Purpose of Expenditure National Field Operations Services and Staff	Category/Type
Name of Federal Candidate MARY L LANDRIEU	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____ District: _____ State: <u>LA</u>
Calendar Year-To-Date Per Election for Office Sought 16686.03	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► _____

Full Name of Payee PERSON TO PERSON PAC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 10 / 2014
Mailing Address PO BOX 49336	Amount 5555.55
City State Zip Code COLORADO SPRINGS CO 80494	Transaction ID : SE.5283 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 19 / 2014
Purpose of Expenditure National Field Operations Services and Staff	Category/Type
Name of Federal Candidate GARY PETERS	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____ District: _____ State: <u>MI</u>
Calendar Year-To-Date Per Election for Office Sought 11130.48	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	11111.10
(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.

Mr. KENNETH W. DAVIS JR.

Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
01 / 30 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee PERSON TO PERSON PAC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 16 / 2014
Mailing Address PO BOX 49336	Amount 14444.66
City State Zip Code COLORADO SPRINGS CO 80494	
Purpose of Expenditure National Field Operations Services and Staff	Category/Type
Name of Federal Candidate DAN SULLIVAN	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 21 / 2014
Name of Federal Candidate DAN SULLIVAN	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK
Calendar Year-To-Date Per Election for Office Sought 31130.69	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee PERSON TO PERSON PAC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 16 / 2014
Mailing Address PO BOX 49336	Amount 14444.66
City State Zip Code COLORADO SPRINGS CO 80494	
Purpose of Expenditure National Field Operations Services and Staff	Category/Type
Name of Federal Candidate MARK BEGICH	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 21 / 2014
Name of Federal Candidate MARK BEGICH	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK
Calendar Year-To-Date Per Election for Office Sought 45575.35	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	28889.32
(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.

Mr. KENNETH W. DAVIS JR.

Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
01 / 30 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee PERSON TO PERSON PAC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 16 / 2014
Mailing Address PO BOX 49336	Amount 14444.66
City State Zip Code COLORADO SPRINGS CO 80494	Transaction ID : SE.5320 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 21 / 2014
Purpose of Expenditure National Field Operations Services and Staff	Category/Type
Name of Federal Candidate THOMAS COTTON	<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) _____
Calendar Year-To-Date Per Election for Office Sought 31130.69	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) _____

Full Name of Payee PERSON TO PERSON PAC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 16 / 2014
Mailing Address PO BOX 49336	Amount 14444.66
City State Zip Code COLORADO SPRINGS CO 80494	Transaction ID : SE.5321 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 21 / 2014
Purpose of Expenditure National Field Operations Services and Staff	Category/Type
Name of Federal Candidate MARK LUNSFORD PRYOR	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 45575.35	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	28889.32
(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.

Mr. KENNETH W. DAVIS JR.

Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
01 / 30 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee PERSON TO PERSON PAC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 16 / 2014
Mailing Address PO BOX 49336	Amount 14444.66
City State Zip Code COLORADO SPRINGS CO 80494	Transaction ID : SE.5322 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 21 / 2014
Purpose of Expenditure National Field Operations Services and Staff	Category/Type
Name of Federal Candidate CORY GARDNER	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought 35634.18	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee PERSON TO PERSON PAC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 16 / 2014
Mailing Address PO BOX 49336	Amount 14444.66
City State Zip Code COLORADO SPRINGS CO 80494	Transaction ID : SE.5323 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 21 / 2014
Purpose of Expenditure National Field Operations Services and Staff	Category/Type
Name of Federal Candidate MARK E UDALL	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought 50078.84	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	28889.32
(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.

Mr. KENNETH W. DAVIS JR.

Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
01 / 30 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
PERSON TO PERSON PAC
Mailing Address
PO BOX 49336
City
COLORADO SPRINGS State
CO Zip Code
80494
Purpose of Expenditure
National Field Operations Services and Staff
Category/Type
Name of Federal Candidate
JONI K ERNST
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
31130.70

Date of Public Distribution/Dissemination
10 / 16 / 2014
Amount
14444.66
Transaction ID : SE.5324
Date of Disbursement or Obligation
08 / 21 / 2014
Office Sought:
House
Senate
State: IA
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
PERSON TO PERSON PAC
Mailing Address
PO BOX 49336
City
COLORADO SPRINGS State
CO Zip Code
80494
Purpose of Expenditure
National Field Operations Services and Staff
Category/Type
Name of Federal Candidate
BRUCE L BRALEY
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
45575.36

Date of Public Distribution/Dissemination
10 / 16 / 2014
Amount
14444.66
Transaction ID : SE.5325
Date of Disbursement or Obligation
08 / 21 / 2014
Office Sought:
House
Senate
State: IA
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 28889.32
(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.

Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01 / 30 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
PERSON TO PERSON PAC
Mailing Address PO BOX 49336
City COLORADO SPRINGS State CO Zip Code 80494
Purpose of Expenditure National Field Operations Services and Staff
Name of Federal Candidate WILLIAM CASSIDY
Calendar Year-To-Date Per Election for Office Sought 31130.69

Date of Public Distribution/Dissemination 10 / 16 / 2014
Amount 14444.66
Transaction ID : SE.5326
Date of Disbursement or Obligation 08 / 21 / 2014
Office Sought: House District: LA
Disbursement For: Primary General 2014

Full Name of Payee
PERSON TO PERSON PAC
Mailing Address PO BOX 49336
City COLORADO SPRINGS State CO Zip Code 80494
Purpose of Expenditure National Field Operations Services and Staff
Name of Federal Candidate MARY L LANDRIEU
Calendar Year-To-Date Per Election for Office Sought 45575.35

Date of Public Distribution/Dissemination 10 / 16 / 2014
Amount 14444.66
Transaction ID : SE.5327
Date of Disbursement or Obligation 08 / 21 / 2014
Office Sought: House District: LA
Disbursement For: Primary General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 28889.32
(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.
Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01 / 30 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee PERSON TO PERSON PAC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 16 / 2014
Mailing Address PO BOX 49336	Amount 14444.66
City State Zip Code COLORADO SPRINGS CO 80494	Transaction ID : SE.5328 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 21 / 2014
Purpose of Expenditure National Field Operations Services and Staff	Category/Type
Name of Federal Candidate TERRI LYNN LAND	<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"/> District: _____ <input type="checkbox"/> State: MI
Calendar Year-To-Date Per Election for Office Sought 31130.69	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee PERSON TO PERSON PAC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 16 / 2014
Mailing Address PO BOX 49336	Amount 14444.66
City State Zip Code COLORADO SPRINGS CO 80494	Transaction ID : SE.5329 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 21 / 2014
Purpose of Expenditure National Field Operations Services and Staff	Category/Type
Name of Federal Candidate GARY PETERS	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> State: MI
Calendar Year-To-Date Per Election for Office Sought 45575.35	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	28889.32
(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.

Mr. KENNETH W. DAVIS JR.

Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
01 / 30 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee PERSON TO PERSON PAC	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2014
Mailing Address PO BOX 49336	Amount 14444.66
City State Zip Code COLORADO SPRINGS CO 80494	Transaction ID : SE.5330 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 21 / 2014
Purpose of Expenditure National Field Operations Services and Staff	Category/Type []
Name of Federal Candidate THOM R TILLIS	<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: _____ State: NC
Calendar Year-To-Date Per Election for Office Sought 31130.69	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► _____

Full Name of Payee PERSON TO PERSON PAC	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2014
Mailing Address PO BOX 49336	Amount 14444.66
City State Zip Code COLORADO SPRINGS CO 80494	Transaction ID : SE.5331 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 21 / 2014
Purpose of Expenditure National Field Operations Services and Staff	Category/Type []
Name of Federal Candidate KAY R HAGAN	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____ District: _____ State: NC
Calendar Year-To-Date Per Election for Office Sought 45575.35	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	28889.32
(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.

Mr. KENNETH W. DAVIS JR.

[Electronically Filed]

Signature _____ Date M M M / D D D / Y Y Y Y Y Y
01 / 30 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Hunter Pickels
MEMO ITEM
Mailing Address 6536 LaSalle Ave
City Baton Rouge State LA Zip Code 70806
Purpose of Expenditure Media Election Consulting
Name of Federal Candidate WILLIAM CASSIDY
Support
Calendar Year-To-Date Per Election for Office Sought 0.00

Date of Public Distribution/Dissemination
08 / 24 / 2014
Amount 7500.00
Transaction ID : SE.5255
Date of Disbursement or Obligation
Office Sought: Senate State: LA
Disbursement For: General 2014

Full Name of Payee
Hunter Pickels
Mailing Address 6536 LaSalle Ave
City Baton Rouge State LA Zip Code 70806
Purpose of Expenditure Media Election Consulting
Name of Federal Candidate WILLIAM CASSIDY
Support
Calendar Year-To-Date Per Election for Office Sought 49325.35

Date of Public Distribution/Dissemination
08 / 24 / 2014
Amount 3750.00
Transaction ID : SE.4498
Date of Disbursement or Obligation
Office Sought: Senate State: LA
Disbursement For: General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 3750.00
(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.

Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01 / 30 / 2015
Signature

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

Form/Schedule: SE

Transaction ID : SE.5255

24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948734 reporting lump sum estimated due to vendor.

Form/Schedule: SE

Transaction ID: SE.4498

24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948734 reporting lump sum estimated due to vendor.

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Hunter Pickels
Mailing Address
6536 LaSalle Ave
City
Baton Rouge State
LA Zip Code
70806
Purpose of Expenditure
Media Election Consulting
Category/Type
Name of Federal Candidate
WILLIAM CASSIDY
Support
Calendar Year-To-Date
Per Election for Office Sought
91330.36

Date of Public Distribution/Dissemination
08 / 24 / 2014
Amount
7500.00
Transaction ID : SE.5236
Date of Disbursement or Obligation
09 / 05 / 2014
Office Sought:
Senate State: LA
Disbursement For:
General 2014

Full Name of Payee
Pressman Printing Inc
Mailing Address
8308 Clifford St
City
Fort Worth State
TX Zip Code
76108
Purpose of Expenditure
Printing and Shipping for Door Hangers
Category/Type
Name of Federal Candidate
DAN SULLIVAN
Support
Calendar Year-To-Date
Per Election for Office Sought
99113.53

Date of Public Distribution/Dissemination
09 / 13 / 2014
Amount
394.15
Transaction ID : SE.4651
Date of Disbursement or Obligation
09 / 15 / 2014
Office Sought:
Senate State: AK
Disbursement For:
General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 7894.15
(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.

Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01 / 30 / 2015
Signature

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

Form/Schedule: SE

Transaction ID : SE.5236

24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948734 reporting lump sum estimated due to vendor.

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)		FEC IDENTIFICATION NUMBER ▼ C C00563064
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 Pressman Printing Inc		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 13 / 2014	
Mailing Address 8308 Clifford St		Amount 1182.43	
City Fort Worth	State TX	Zip Code 76108	Transaction ID : SE.4652
Purpose of Expenditure Printing and Shipping for Door Hangers	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 15 / 2014	
Name of Federal Candidate THOMAS COTTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AR</u>
Calendar Year-To-Date Per Election for Office Sought		104528.35	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Pressman Printing Inc		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 13 / 2014	
Mailing Address 8308 Clifford St		Amount 2956.08	
City Fort Worth	State TX	Zip Code 76108	Transaction ID : SE.4653
Purpose of Expenditure Printing and Shipping for Door Hangers	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 15 / 2014	
Name of Federal Candidate CORY GARDNER		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought		121806.87	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	4138.51
(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.

Mr. KENNETH W. DAVIS JR.

Signature _____ [Electronically Filed] Date **01 / 30 / 2015**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Pressman Printing Inc
Mailing Address
8308 Clifford St
City
Fort Worth State
TX Zip Code
76108
Purpose of Expenditure
Printing and Shipping for Door Hangers
Category/Type
Name of Federal Candidate
JONI K ERNST
Support
Office Sought:
House
Senate
State: IA
Calendar Year-To-Date
Per Election for Office Sought
119757.15

Date of Public Distribution/Dissemination
09 / 13 / 2014
Amount
1970.72
Transaction ID : SE.4654
Date of Disbursement or Obligation
09 / 15 / 2014
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Pressman Printing Inc
Mailing Address
8308 Clifford St
City
Fort Worth State
TX Zip Code
76108
Purpose of Expenditure
Printing and Shipping for Door Hangers
Category/Type
Name of Federal Candidate
WILLIAM CASSIDY
Support
Office Sought:
House
Senate
State: LA
Calendar Year-To-Date
Per Election for Office Sought
109409.58

Date of Public Distribution/Dissemination
09 / 13 / 2014
Amount
2167.80
Transaction ID : SE.4655
Date of Disbursement or Obligation
09 / 15 / 2014
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 4138.52
(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.
Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01 / 30 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)		FEC IDENTIFICATION NUMBER ▼ C C00563064
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 Red State Productions		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2014	
Mailing Address 1629 K St NW Ste 300		Amount 7142.86	
City Washington	State DC	Zip Code 20006	Transaction ID : SE.5350
Purpose of Expenditure Voter Rally	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 10 / 2014	
Name of Federal Candidate DAN SULLIVAN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AK</u>
Calendar Year-To-Date Per Election for Office Sought		84076.52	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Red State Productions		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2014	
Mailing Address 1629 K St NW Ste 300		Amount 7142.86	
City Washington	State DC	Zip Code 20006	Transaction ID : SE.5352
Purpose of Expenditure Voter Rally	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 10 / 2014	
Name of Federal Candidate DAN SULLIVAN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AK</u>
Calendar Year-To-Date Per Election for Office Sought		91219.38	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	14285.72
(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.

Mr. KENNETH W. DAVIS JR.

Signature _____ [Electronically Filed] Date MM / DD / YYYY
01 / 30 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Red State Productions
Mailing Address
1629 K St NW
Ste 300
City
Washington State
DC Zip Code
20006
Purpose of Expenditure
Voter Rally
Category/Type
Name of Federal Candidate
THOMAS COTTON
Support
Office Sought:
Senate State: AR
Calendar Year-To-Date
Per Election for Office Sought
102879.91

Date of Public Distribution/Dissemination
10 / 15 / 2014
Amount
14285.72
Transaction ID : SE.5353
Date of Disbursement or Obligation
09 / 10 / 2014
Disbursement For:
General 2014

Full Name of Payee
Red State Productions
Mailing Address
1629 K St NW
Ste 300
City
Washington State
DC Zip Code
20006
Purpose of Expenditure
Voter Rally
Category/Type
Name of Federal Candidate
CORY GARDNER
Support
Office Sought:
Senate State: CO
Calendar Year-To-Date
Per Election for Office Sought
118336.00

Date of Public Distribution/Dissemination
10 / 15 / 2014
Amount
14285.72
Transaction ID : SE.5354
Date of Disbursement or Obligation
09 / 10 / 2014
Disbursement For:
General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 28571.44
(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.

Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01 / 30 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Red State Productions
Mailing Address
1629 K St NW
Ste 300
City
Washington State
DC Zip Code
20006
Purpose of Expenditure
Voter Rally
Category/Type
Name of Federal Candidate
JONI K ERNST
Support
Office Sought:
Senate State: IA
Calendar Year-To-Date
Per Election for Office Sought
116715.63

Date of Public Distribution/Dissemination
10 / 15 / 2014
Amount
14285.72
Transaction ID : SE.5355
Date of Disbursement or Obligation
09 / 10 / 2014
Disbursement For:
General 2014

Full Name of Payee
Red State Productions
Mailing Address
1629 K St NW
Ste 300
City
Washington State
DC Zip Code
20006
Purpose of Expenditure
Voter Rally
Category/Type
Name of Federal Candidate
WILLIAM CASSIDY
Support
Office Sought:
Senate State: LA
Calendar Year-To-Date
Per Election for Office Sought
107227.15

Date of Public Distribution/Dissemination
10 / 15 / 2014
Amount
14285.72
Transaction ID : SE.5356
Date of Disbursement or Obligation
09 / 10 / 2014
Disbursement For:
General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 28571.44
(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.
Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01 / 30 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Red State Productions
Mailing Address: 1629 K St NW, Ste 300
City: Washington, State: DC, Zip Code: 20006
Purpose of Expenditure: Voter Rally
Name of Federal Candidate: TERRI LYNN LAND
Office Sought: Senate, State: MI
Amount: 14285.72
Transaction ID: SE.5357
Date of Disbursement or Obligation: 09/10/2014
Disbursement For: General 2014
Calendar Year-To-Date Per Election for Office Sought: 136455.01

Full Name of Payee: Red State Productions
Mailing Address: 1629 K St NW, Ste 300
City: Washington, State: DC, Zip Code: 20006
Purpose of Expenditure: Voter Rally
Name of Federal Candidate: THOM R TILLIS
Office Sought: Senate, State: NC
Amount: 14285.71
Transaction ID: SE.5358
Date of Disbursement or Obligation: 09/10/2014
Disbursement For: General 2014
Calendar Year-To-Date Per Election for Office Sought: 125279.62

(a) SUBTOTAL of Itemized Independent Expenditures: 28571.43
(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.
Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date: 01/30/2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Ryan Rhodes
Mailing Address: 537 28th St
City: West Des Moines, State: IA, Zip Code: 50265
Purpose of Expenditure: Media Election Consulting
Name of Federal Candidate: JONI K ERNST
Office Sought: Senate
Amount: 7500.00
Transaction ID: SE.5256
Date of Disbursement or Obligation: 08/24/2014
Disbursement For: General 2014

Full Name of Payee: Ryan Rhodes
Mailing Address: 537 28th St
City: West Des Moines, State: IA, Zip Code: 50265
Purpose of Expenditure: Media Election Consulting
Name of Federal Candidate: JONI K ERNST
Office Sought: Senate
Amount: 7500.00
Transaction ID: SE.4470
Date of Disbursement or Obligation: 08/22/2014
Disbursement For: General 2014

(a) SUBTOTAL of Itemized Independent Expenditures: 7500.00
(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.
Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date: 01/30/2015
Signature

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

Form/Schedule: SE

Transaction ID : SE.5256

24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948731 reporting lump sum estimated due to vendor. The original Notice was later amended by report ID FEC-949509 filed on 8/30/2014 for reasons unrelated to this transactions.

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Ryan Rhodes
Mailing Address
537 28th St
City
West Des Moines State
IA Zip Code
50265
Purpose of Expenditure
Media Election Consulting
Category/Type
Name of Federal Candidate
JONI K ERNST
Support
Office Sought:
House
Senate
State: IA
Calendar Year-To-Date
Per Election for Office Sought
80170.59

Date of Public Distribution/Dissemination
08 / 24 / 2014
Amount
7500.00
Transaction ID : SE.4471
Date of Disbursement or Obligation
09 / 05 / 2014
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Sperry Van Ness/ArkBest Realty Inc.
Mailing Address
724 Garland St
City
Little Rock State
AR Zip Code
72201
Purpose of Expenditure
Office Space Rental
Category/Type
Name of Federal Candidate
THOMAS COTTON
Support
Office Sought:
House
Senate
State: AR
Calendar Year-To-Date
Per Election for Office Sought
56481.35

Date of Public Distribution/Dissemination
08 / 24 / 2014
Amount
3406.00
Transaction ID : SE.4487
Date of Disbursement or Obligation
08 / 28 / 2014
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 10906.00
(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.
Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01 / 30 / 2015
Signature

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

Form/Schedule: SE

Transaction ID : SE.4471

24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948731 reporting lump sum estimated due to vendor. The original Notice was later amended by report ID FEC-949509 filed on 8/30/2014 for reasons unrelated to this transactions.

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Staples
Mailing Address
500 Staples Dr
City Farmingham State MA Zip Code 01702
Purpose of Expenditure
Supplies for Phone Centers
Category/Type
Name of Federal Candidate
DAN SULLIVAN
Support
Office Sought: Senate State: AK
Calendar Year-To-Date
Per Election for Office Sought
76933.66
Disbursement For: General
2014

Full Name of Payee
Staples
Mailing Address
500 Staples Dr
City Farmingham State MA Zip Code 01702
Purpose of Expenditure
Supplies for Phone Centers
Category/Type
Name of Federal Candidate
THOMAS COTTON
Support
Office Sought: Senate State: AR
Calendar Year-To-Date
Per Election for Office Sought
88594.19
Disbursement For: General
2014

(a) SUBTOTAL of Itemized Independent Expenditures 2102.28
(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.

Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01 / 30 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Staples
Mailing Address
500 Staples Dr
City
Farmingham State
MA Zip Code
01702
Purpose of Expenditure
Supplies for Phone Centers
Category/Type
Date of Public Distribution/Dissemination
09 / 18 / 2014
Amount
1039.64
Transaction ID : SE.4603
Date of Disbursement or Obligation
09 / 10 / 2014
Name of Federal Candidate
WILLIAM CASSIDY
Support
Office Sought:
Senate State: LA
Calendar Year-To-Date
Per Election for Office Sought
92941.43
Disbursement For:
General 2014

Full Name of Payee
Staples
Mailing Address
500 Staples Dr
City
Farmingham State
MA Zip Code
01702
Purpose of Expenditure
Supplies for Phone Centers
Category/Type
Date of Public Distribution/Dissemination
09 / 18 / 2014
Amount
1106.46
Transaction ID : SE.5003
Date of Disbursement or Obligation
09 / 10 / 2014
Name of Federal Candidate
JONI K ERNST
Support
Office Sought:
Senate State: IA
Calendar Year-To-Date
Per Election for Office Sought
102429.91
Disbursement For:
General 2014

(a) SUBTOTAL of Itemized Independent Expenditures..... 2146.10
(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.
Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01 / 30 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
---	--

Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee Staples	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 18 / 2014
Mailing Address 500 Staples Dr	Amount 391.03
City Farmingham State MA Zip Code 01702	Transaction ID : SE.4598 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 11 / 2014
Purpose of Expenditure Supplies for Phone Centers	Category/Type
Name of Federal Candidate CORY GARDNER	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO
Calendar Year-To-Date Per Election for Office Sought 118727.03	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Staples	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 18 / 2014
Mailing Address 500 Staples Dr	Amount 785.72
City Farmingham State MA Zip Code 01702	Transaction ID : SE.4599 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 11 / 2014
Purpose of Expenditure Supplies for Phone Centers	Category/Type
Name of Federal Candidate JONI K ERNST	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA
Calendar Year-To-Date Per Election for Office Sought 117501.35	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1176.75
(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.

Mr. KENNETH W. DAVIS JR. [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
01 / 30 / 2015

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Staples
Mailing Address
500 Staples Dr
City
Farmingham State
MA Zip Code
01702
Purpose of Expenditure
Supplies for Phone Centers
Category/Type
Name of Federal Candidate
TERRI LYNN LAND
Support
Office Sought:
House
Senate
State: MI
Calendar Year-To-Date
Per Election for Office Sought
137000.08

Date of Public Distribution/Dissemination
09 / 18 / 2014
Amount
545.07
Transaction ID : SE.4602
Date of Disbursement or Obligation
09 / 11 / 2014
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Strategic Media 21
Mailing Address
560 S. Winchester Blvd
Ste 500
City
San Jose State
CA Zip Code
95128
Purpose of Expenditure
Advertising Services and Production
Category/Type
Name of Federal Candidate
JONI K ERNST
Support
Office Sought:
House
Senate
State: IA
Calendar Year-To-Date
Per Election for Office Sought
97730.59

Date of Public Distribution/Dissemination
08 / 28 / 2014
Amount
15000.00
Transaction ID : SE.4563
Date of Disbursement or Obligation
09 / 05 / 2014
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 15545.07
(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.
Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01 / 30 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Strategic Media 21
Mailing Address
560 S. Winchester Blvd
Ste 500
City
San Jose State
CA Zip Code
95128
Purpose of Expenditure
Advertising Services and Production
Category/Type
Name of Federal Candidate
DAN SULLIVAN
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
74203.93

Date of Public Distribution/Dissemination
08 / 28 / 2014
Amount
15000.00
Transaction ID : SE.4564
Date of Disbursement or Obligation
09 / 05 / 2014
Office Sought:
House District:
President Senate State: AK
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Strategic Media 21
Mailing Address
560 S. Winchester Blvd
Ste 500
City
San Jose State
CA Zip Code
95128
Purpose of Expenditure
Advertising Services and Production
Category/Type
Name of Federal Candidate
THOMAS COTTON
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
85909.93

Date of Public Distribution/Dissemination
08 / 28 / 2014
Amount
15000.00
Transaction ID : SE.4565
Date of Disbursement or Obligation
09 / 05 / 2014
Office Sought:
House District:
President Senate State: AR
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 30000.00
(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.

Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01 / 30 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 Strategic Media 21	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 28 / 2014
Mailing Address 560 S. Winchester Blvd Ste 500	Amount 15000.00
City State Zip Code San Jose CA 95128	Transaction ID : SE.4568 Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014
Purpose of Expenditure Advertising Services and Production	Category/Type
Name of Federal Candidate TERRI LYNN LAND	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 120503.93	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI
	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Strategic Media 21	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 28 / 2014
Mailing Address 560 S. Winchester Blvd Ste 500	Amount 15000.00
City State Zip Code San Jose CA 95128	Transaction ID : SE.4569 Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014
Purpose of Expenditure Advertising Services and Production	Category/Type
Name of Federal Candidate STEVEN DAINES	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 15000.00	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MT
	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	30000.00
(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.

Mr. KENNETH W. DAVIS JR.

Signature _____ [Electronically Filed] Date MM / DD / YYYY
01 / 30 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Strategic Media 21
Mailing Address
560 S. Winchester Blvd
Ste 500
City
San Jose State
CA Zip Code
95128
Purpose of Expenditure
Advertising Services and Production
Category/Type
Name of Federal Candidate
THOM R TILLIS
Support
Office Sought:
House
Senate
State: NC
Calendar Year-To-Date
Per Election for Office Sought
109351.05

Date of Public Distribution/Dissemination
08 / 28 / 2014
Amount
15000.00
Transaction ID : SE.4570
Date of Disbursement or Obligation
09 / 05 / 2014
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Strategic Media 21
Mailing Address
560 S. Winchester Blvd
Ste 500
City
San Jose State
CA Zip Code
95128
Purpose of Expenditure
Advertising Services and Production
Category/Type
Name of Federal Candidate
DAN SULLIVAN
Support
Office Sought:
House
Senate
State: AK
Calendar Year-To-Date
Per Election for Office Sought
101970.53

Date of Public Distribution/Dissemination
09 / 18 / 2014
Amount
2857.00
Transaction ID : SE.4996
Date of Disbursement or Obligation
09 / 19 / 2014
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 17857.00
(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.
Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01 / 30 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Strategic Media 21
Mailing Address: 560 S. Winchester Blvd, Ste 500, San Jose, CA 95128
Purpose of Expenditure: Advertising Services and Production
Name of Federal Candidate: TERRI LYNN LAND
Office Sought: Senate, State: MI
Disbursement For: General
Amount: 2857.00
Transaction ID: SE.5001

Full Name of Payee: Strategic Media 21
Mailing Address: 560 S. Winchester Blvd, Ste 500, San Jose, CA 95128
Purpose of Expenditure: Advertising Services and Production
Name of Federal Candidate: THOM R TILLIS
Office Sought: Senate, State: NC
Disbursement For: General
Amount: 2858.00
Transaction ID: SE.5002

(a) SUBTOTAL of Itemized Independent Expenditures: 5715.00
(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.
Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date: 01/30/2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Strategic Media 21
Mailing Address
560 S. Winchester Blvd
Ste 500
City San Jose State CA Zip Code 95128
Purpose of Expenditure
Advertising Services and Production
Category/Type

Date of Public Distribution/Dissemination
09 / 18 / 2014
Amount
2857.00
Transaction ID : SE.6564
Date of Disbursement or Obligation
09 / 19 / 2014

Name of Federal Candidate
THOMAS COTTON
Support
Office Sought:
House
Senate
State: AR
Calendar Year-To-Date
Per Election for Office Sought
107385.35

Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Strategic Media 21
Mailing Address
560 S. Winchester Blvd
Ste 500
City San Jose State CA Zip Code 95128
Purpose of Expenditure
Advertising Services and Production
Category/Type

Date of Public Distribution/Dissemination
09 / 18 / 2014
Amount
2857.00
Transaction ID : SE.6567
Date of Disbursement or Obligation
09 / 19 / 2014

Name of Federal Candidate
CORY GARDNER
Support
Office Sought:
House
Senate
State: CO
Calendar Year-To-Date
Per Election for Office Sought
124663.87

Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 5714.00
(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.

Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01 / 30 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Strategic Media 21
Mailing Address
560 S. Winchester Blvd
Ste 500
City
San Jose State
CA Zip Code
95128
Purpose of Expenditure
Advertising Services and Production
Category/Type

Date of Public Distribution/Dissemination
09 / 18 / 2014
Amount
12500.00
Transaction ID : SE.4988
Date of Disbursement or Obligation
09 / 22 / 2014

Name of Federal Candidate
DAN SULLIVAN
Support
Office Sought:
House
Senate
State: AK
Calendar Year-To-Date
Per Election for Office Sought
114470.53

Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Strategic Media 21
Mailing Address
560 S. Winchester Blvd
Ste 500
City
San Jose State
CA Zip Code
95128
Purpose of Expenditure
Advertising Services and Production
Category/Type

Date of Public Distribution/Dissemination
09 / 18 / 2014
Amount
12500.00
Transaction ID : SE.4989
Date of Disbursement or Obligation
09 / 22 / 2014

Name of Federal Candidate
THOMAS COTTON
Support
Office Sought:
House
Senate
State: AR
Calendar Year-To-Date
Per Election for Office Sought
119885.35

Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 25000.00
(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.

Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01 / 30 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 Strategic Media 21	Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 18 / 2014
Mailing Address 560 S. Winchester Blvd Ste 500	Amount 12500.00
City State Zip Code San Jose CA 95128	Transaction ID : SE.4990 Date of Disbursement or Obligation MM / DD / YYYY 09 / 22 / 2014
Purpose of Expenditure Advertising Services and Production	Category/Type
Name of Federal Candidate CORY GARDNER	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: CO
Calendar Year-To-Date Per Election for Office Sought 137163.87	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Strategic Media 21	Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 18 / 2014
Mailing Address 560 S. Winchester Blvd Ste 500	Amount 12500.00
City State Zip Code San Jose CA 95128	Transaction ID : SE.4991 Date of Disbursement or Obligation MM / DD / YYYY 09 / 22 / 2014
Purpose of Expenditure Advertising Services and Production	Category/Type
Name of Federal Candidate JONI K ERNST	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: IA
Calendar Year-To-Date Per Election for Office Sought 135114.15	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	25000.00
(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.

Mr. KENNETH W. DAVIS JR.

Signature _____ Date **01 / 30 / 2015**

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Strategic Media 21
Mailing Address: 560 S. Winchester Blvd, Ste 500, San Jose, CA 95128
Purpose of Expenditure: Advertising Services and Production
Name of Federal Candidate: WILLIAM CASSIDY
Calendar Year-To-Date Per Election for Office Sought: 124766.58
Date of Public Distribution/Dissemination: 09/18/2014
Amount: 12500.00
Transaction ID: SE.4992
Date of Disbursement or Obligation: 09/22/2014
Office Sought: Senate, State: LA
Disbursement For: General

Full Name of Payee: Strategic Media 21
Mailing Address: 560 S. Winchester Blvd, Ste 500, San Jose, CA 95128
Purpose of Expenditure: Advertising Services and Production
Name of Federal Candidate: TERRI LYNN LAND
Calendar Year-To-Date Per Election for Office Sought: 158873.43
Date of Public Distribution/Dissemination: 09/18/2014
Amount: 12500.00
Transaction ID: SE.4993
Date of Disbursement or Obligation: 09/22/2014
Office Sought: Senate, State: MI
Disbursement For: General

(a) SUBTOTAL of Itemized Independent Expenditures: 25000.00
(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.
Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date: 01/30/2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00563064 </div>
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 Strategic Media 21		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 18 / 2014	
Mailing Address 560 S. Winchester Blvd Ste 500		Amount 12500.00	
City San Jose	State CA	Zip Code 95128	Transaction ID : SE.4995
Purpose of Expenditure Advertising Services and Production	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 22 / 2014	
Name of Federal Candidate THOM R TILLIS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought		146468.94	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Strategic Media 21		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 18 / 2014	
Mailing Address 560 S. Winchester Blvd Ste 500		Amount 12500.00	
City San Jose	State CA	Zip Code 95128	Transaction ID : SE.6561
Purpose of Expenditure Advertising Services and Production	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 22 / 2014	
Name of Federal Candidate STEVEN DAINES		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MT</u>
Calendar Year-To-Date Per Election for Office Sought		27500.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	25000.00
(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.

Mr. *KENNETH W. DAVIS JR.*

Signature _____ [Electronically Filed] Date **01 / 30 / 2015**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Switch Consulting Group
Mailing Address: 212 E Madison St
City: Colorado Springs, State: CO, Zip Code: 80907
Purpose of Expenditure: Office Space Rental
Date of Public Distribution/Dissemination: 08/24/2014
Amount: 3300.00
Transaction ID: SE.4480
Date of Disbursement or Obligation: 08/28/2014
Name of Federal Candidate: CORY GARDNER
Support: [X]
Office Sought: Senate
State: CO
Calendar Year-To-Date Per Election for Office Sought: 60878.84
Disbursement For: General 2014

Full Name of Payee: Switch Consulting Group
Mailing Address: 212 E Madison St
City: Colorado Springs, State: CO, Zip Code: 80907
Purpose of Expenditure: Office Space Rental
Date of Public Distribution/Dissemination: 10/20/2014
Amount: 2500.00
Transaction ID: SE.5863
Date of Disbursement or Obligation: 09/29/2014
Name of Federal Candidate: CORY GARDNER
Support: [X]
Office Sought: Senate
State: CO
Calendar Year-To-Date Per Election for Office Sought: 139663.87
Disbursement For: General 2014

(a) SUBTOTAL of Itemized Independent Expenditures: 5800.00
(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.
Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date: 01/30/2015
Signature

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

Form/Schedule: SE

Transaction ID : SE.5863

Transaction is included based on disbursement date and not dissemination date of 10/20/2014. 24/28 Hour Notice was timely filed as report ID FEC-963136 on 10/20/2014.

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 MM / DD / YYYY	

Full Name of Payee The Political Network	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 24 / 2014
Mailing Address 225 East 85th St Ste 306	Amount 4503.51
City State Zip Code New York NY 10028	
Purpose of Expenditure Telecommunications Services and Equipment Rental	Category/Type
Name of Federal Candidate THOM R TILLIS	Date of Disbursement or Obligation MM / DD / YYYY 08 / 12 / 2014
Name of Federal Candidate THOM R TILLIS	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</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) ▶ _____
	4503.51

Full Name of Payee The Political Network	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 24 / 2014
Mailing Address 225 East 85th St Ste 306	Amount 4503.51
City State Zip Code New York NY 10028	
Purpose of Expenditure Telecommunications Services and Equipment Rental	Category/Type
Name of Federal Candidate TERRI LYNN LAND	Date of Disbursement or Obligation MM / DD / YYYY 08 / 12 / 2014
Name of Federal Candidate TERRI LYNN LAND	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MI</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) ▶ _____
	5574.93

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	9007.02
(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.

Mr. *KENNETH W. DAVIS JR.* [Electronically Filed] Date MM / DD / YYYY
01 / 30 / 2015

 Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
The Political Network
Mailing Address
225 East 85th St
Ste 306
City
New York State
NY Zip Code
10028
Purpose of Expenditure
Telecommunications Services and Equipment Rental
Category/Type
Name of Federal Candidate
JONI K ERNST
Support
Office Sought:
House District:
President Senate State: IA
Calendar Year-To-Date
Per Election for Office Sought
4503.51

Date of Public Distribution/Dissemination
08 / 24 / 2014
Amount
4503.51
Transaction ID : SE.4473
Date of Disbursement or Obligation
08 / 12 / 2014
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
The Political Network
Mailing Address
225 East 85th St
Ste 306
City
New York State
NY Zip Code
10028
Purpose of Expenditure
Telecommunications Services and Equipment Rental
Category/Type
Name of Federal Candidate
CORY GARDNER
Support
Office Sought:
House District:
President Senate State: CO
Calendar Year-To-Date
Per Election for Office Sought
10078.42

Date of Public Distribution/Dissemination
08 / 24 / 2014
Amount
9007.00
Transaction ID : SE.4481
Date of Disbursement or Obligation
08 / 12 / 2014
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 13510.51
(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.

Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01 / 30 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTE 2 REDUCE DEBT (V2RD)
FEC IDENTIFICATION NUMBER
C C00563064
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
The Political Network
Mailing Address
225 East 85th St
Ste 306
City
New York State
NY Zip Code
10028
Purpose of Expenditure
Telecommunications Services and Equipment Rental
Category/Type
Name of Federal Candidate
THOMAS COTTON
Support
Office Sought:
House
Senate
State: AR
Calendar Year-To-Date
Per Election for Office Sought
5574.93

Date of Public Distribution/Dissemination
08 / 24 / 2014
Amount
4503.51
Transaction ID : SE.4488
Date of Disbursement or Obligation
08 / 12 / 2014
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
The Political Network
Mailing Address
225 East 85th St
Ste 306
City
New York State
NY Zip Code
10028
Purpose of Expenditure
Telecommunications Services and Equipment Rental
Category/Type
Name of Federal Candidate
WILLIAM CASSIDY
Support
Office Sought:
House
Senate
State: LA
Calendar Year-To-Date
Per Election for Office Sought
5574.93

Date of Public Distribution/Dissemination
08 / 24 / 2014
Amount
4503.51
Transaction ID : SE.4493
Date of Disbursement or Obligation
08 / 12 / 2014
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 9007.02
(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.
Mr. KENNETH W. DAVIS JR.
[Electronically Filed]
Date 01 / 30 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee The Political Network	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 24 / 2014
Mailing Address 225 East 85th St Ste 306	Amount 4503.51
City State Zip Code New York NY 10028	Transaction ID : SE.4500 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 12 / 2014
Purpose of Expenditure Telecommunications Services and Equipment Rental	Category/Type
Name of Federal Candidate DAN SULLIVAN	<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: _____ State: AK
Calendar Year-To-Date Per Election for Office Sought 5574.93	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► _____

Full Name of Payee Walmart	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 18 / 2014
Mailing Address 702 SW 8th St	Amount 285.08
City State Zip Code Bentonville AR 72716	Transaction ID : SE.5004 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 11 / 2014
Purpose of Expenditure Supplies for Phone Centers	Category/Type
Name of Federal Candidate JONI K ERNST	<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: _____ State: IA
Calendar Year-To-Date Per Election for Office Sought 117786.43	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	4788.59
(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.

Mr. KENNETH W. DAVIS JR. [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
01 / 30 / 2015

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Jebb Young [MEMO ITEM]	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 24 / 2014
Mailing Address 4200 Calion Hwy	Amount 7500.00
City State Zip Code El Dorado AR 71730	Transaction ID : SE.5259 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Purpose of Expenditure Media Election Consulting	Category/Type []
Name of Federal Candidate THOMAS COTTON	<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) _____
Calendar Year-To-Date Per Election for Office Sought 0.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) _____

Full Name of Payee Jebb Young	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 24 / 2014
Mailing Address 4200 Calion Hwy	Amount 7500.00
City State Zip Code El Dorado AR 71730	Transaction ID : SE.4486 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 22 / 2014
Purpose of Expenditure Media Election Consulting	Category/Type []
Name of Federal Candidate THOMAS COTTON	<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) _____
Calendar Year-To-Date Per Election for Office Sought 53075.35	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	7500.00
(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.

Mr. KENNETH W. DAVIS JR.

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
01 / 30 / 2015

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

Form/Schedule: SE

Transaction ID : SE.5259

24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948731 reporting lump sum estimated due to vendor. The original Notice was later amended by report ID FEC-949509 filed on 8/30/2014 for reasons unrelated to this transactions.

Form/Schedule: SE

Transaction ID: SE.4486

24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948731. The original Notice was later amended by report ID FEC-949509 filed on 8/30/2014 for reasons unrelated to this transactions.

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼ C C00563064
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 Jebb Young	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 24 / 2014
Mailing Address 4200 Calion Hwy	Amount 7500.00
City El Dorado	State AR
Zip Code 71730	Transaction ID : SE.4484
Purpose of Expenditure Media Election Consulting	Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014
Name of Federal Candidate THOMAS COTTON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AR</u>
Calendar Year-To-Date Per Election for Office Sought 70909.93	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 MM / DD / YYYY
Mailing Address	Amount
City	State
Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/Type
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) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	7500.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	966742.85

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.

Mr. KENNETH W. DAVIS JR.

[Electronically Filed]

Signature _____ Date **01 / 30 / 2015**

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

Form/Schedule: SE

Transaction ID : SE.4484

24/48 Hour Notice was timely filed on 8/26/2014 on report ID FEC-948731 reporting lump sum estimated due to vendor. The original Notice was later amended by report ID FEC-949509 filed on 8/30/2014 for reasons unrelated to this transactions.

Form/Schedule:

Transaction ID: