

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Liberty for All Action Fund

ADDRESS (number and street) ▼

PO Box 25394

☐ Check if different than previously reported. (ACC)

Alexandria

VA

22313

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00514653

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

(c) 12-Day

PRE-Election

Report for the:

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

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

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

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Christopher M Marston

Signature of Treasurer

Christopher M Marston

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

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

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Liberty for All Action Fund

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 01 2014 To: M M / D D / Y Y Y Y Y Y
09 30 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2014		4100.81
(b) Cash on Hand at Beginning of Reporting Period.....	51205.56	
(c) Total Receipts (from Line 19)	314144.40	591523.38
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	365349.96	595624.19
7. Total Disbursements (from Line 31)	258566.29	488840.52
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	106783.67	106783.67
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	83200.00	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Liberty for All Action Fund

Report Covering the Period:

From:

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

To:

M M / D D / Y Y Y Y
09 / 30 / 2014
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other
Than Political Committees

(i) Itemized (use Schedule A).....

5000.00

37250.00

(ii) Unitemized

7465.00

21938.93

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

12465.00

59188.93

(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) ►

12465.00

59188.93

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

50000.00

103700.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

660.61

12975.80

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

251018.79

415658.65

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))..... ►

314144.40

591523.38

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

314144.40

591523.38

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	165754.46	274302.88
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	165754.46	274302.88
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)	32616.83	32616.83
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	60000.00	60000.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	195.00	195.00
(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)).....	195.00	195.00
29. Other Disbursements	0.00	121725.81
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)) ..	258566.29	488840.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	258566.29	488840.52

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)	12465.00	59188.93
34. Total Contribution Refunds (from Line 28(d))	195.00	195.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12270.00	58993.93
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	165754.46	274302.88
37. Offsets to Operating Expenditures (from Line 15, page 3).....	660.61	12975.80
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	165093.85	261327.08

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F3XA

Transaction ID :

The Committee inadvertently omitted Loan Information On Sch. C from the original report. This amended report properly reports the outstanding loan and the reduced balance after the loan repayment reported in the original report.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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☒ 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)

Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. MR. STEVEN A. COLSON

Mailing Address 16 MT BETHEL RD. NO. 367

City

WARREN

State

NJ

Zip Code

07059-5604

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2014

Transaction ID : SA11.1154

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

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

5000.00

5000.00

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. JOHN RAMSEY

Mailing Address PO BOX 26141

City

ALEXANDRIA

State

VA

Zip Code

22313

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INVESTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

104039.01

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : SA13.327

Amount of Each Receipt this Period

50000.00

LOAN

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

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

50000.00

50000.00

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. AARON NOSBICH

Mailing Address 8818 TRAVIS HILLS DR APT 712

City

AUSTIN

State

TX

Zip Code

78735

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

321.60

Date of Receipt

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

Transaction ID : SA15.330

Amount of Each Receipt this Period

321.60

REIMBURSEMENT CHECK NEVER CASHED

Full Name (Last, First, Middle Initial)

B. JOHN RAMSEY

Mailing Address PO BOX 26141

City

ALEXANDRIA

State

VA

Zip Code

22313

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INVESTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

104039.01

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA15.351

Amount of Each Receipt this Period

339.01

REFUND OF UNINTENTIONAL DEBIT CARD TRANS

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

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

660.61

660.61

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

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. MR. E. DAVISON MASSEY

Mailing Address 133 CHESTNUT ST

City

WINNETKA

State

IL

Zip Code

60093-3809

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

07 / 28 / 2014

Transaction ID : SA11.1148

Amount of Each Receipt this Period

250000.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. CONSERVATIVE CONNECTOR LLC

Mailing Address 425 E MAIN ST
STE 250

City

GREENWOOD

State

IN

Zip Code

46143

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1864.60

Date of Receipt

07 / 17 / 2014

Transaction ID : SA17.230

Amount of Each Receipt this Period

150.00

LIST RENTAL

Full Name (Last, First, Middle Initial)

C. CONSERVATIVE CONNECTOR LLC

Mailing Address 425 E MAIN ST
STE 250

City

GREENWOOD

State

IN

Zip Code

46143

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1864.60

Date of Receipt

08 / 21 / 2014

Transaction ID : SA17.231

Amount of Each Receipt this Period

500.00

LIST RENTAL

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

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

250650.00

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

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

FOR LINE NUMBER: PAGE 11 OF 51

(check only one)

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

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NAME OF COMMITTEE (In Full)

Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. CONSERVATIVE CONNECTOR LLC

Mailing Address 425 E MAIN ST
STE 250

City State Zip Code
GREENWOOD IN 46143

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1864.60

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 05 / 2014

Transaction ID : SA17.329

Amount of Each Receipt this Period

193.76

LIST RENTAL

Full Name (Last, First, Middle Initial)

B. CONSERVATIVE CONNECTOR LLC

Mailing Address 425 E MAIN ST
STE 250

City State Zip Code
GREENWOOD IN 46143

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1864.60

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 26 / 2014

Transaction ID : SA17.331

Amount of Each Receipt this Period

175.00

LIST RENTAL

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

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

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

368.76

251018.76

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

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. ANNE CASTEELMailing Address 2226 WESTLAKE DR
#2-7

City AUSTIN State TX Zip Code 78746

Purpose of Disbursement
REIMBURSEMENT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 22 2014

Transaction ID : SB21B.I303

Amount of Each Disbursement this Period

192.38

Full Name (Last, First, Middle Initial)

B. ANNE CASTEELMailing Address 2226 WESTLAKE DR
#2-7

City AUSTIN State TX Zip Code 78746

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 02 2014

Transaction ID : SB21B.I306

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. ANNE CASTEELMailing Address 2226 WESTLAKE DR
#2-7

City AUSTIN State TX Zip Code 78746

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 17 2014

Transaction ID : SB21B.I309

Amount of Each Disbursement this Period

4000.00

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

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

8192.38

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

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. ANNE CASTEELMailing Address 2226 WESTLAKE DR
#2-7

City AUSTIN State TX Zip Code 78746

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

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

Transaction ID : SB21B.I312

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. ANNE CASTEELMailing Address 2226 WESTLAKE DR
#2-7

City AUSTIN State TX Zip Code 78746

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 15 2014

Transaction ID : SB21B.I315

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. ANNE CASTEELMailing Address 2226 WESTLAKE DR
#2-7

City AUSTIN State TX Zip Code 78746

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 29 2014

Transaction ID : SB21B.I318

Amount of Each Disbursement this Period

2500.00

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

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

9000.00

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

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. ANNE CASTEELMailing Address 2226 WESTLAKE DR
#2-7

City AUSTIN State TX Zip Code 78746

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 16 / 2014

Transaction ID : SB21B.I321

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. JARED CHICOINEMailing Address 22 BEECH ST
FL 3

City WOODSVILLE State NH Zip Code 03785

Purpose of Disbursement
REIMBURSEMENT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2014

Transaction ID : SB21B.I304

Amount of Each Disbursement this Period

156.92

Full Name (Last, First, Middle Initial)

C. JARED CHICOINEMailing Address 22 BEECH ST
FL 3

City WOODSVILLE State NH Zip Code 03785

Purpose of Disbursement
REIMBURSEMENT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 24 / 2014

Transaction ID : SB21B.I305

Amount of Each Disbursement this Period

69.38

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

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

2726.30

☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

Liberty for All Action Fund

A. JARED CHICOINE

Three digital displays showing the date 07/02/2014 in MM/DD/YYYY format. The first display shows '07', the second shows '02', and the third shows '2014'. Each display has a small 'M' or 'D' or 'Y' indicator above the digits.

Category/
Type

2500.00

State: District:

B. JARED CHICOINE

Category/
Type

State: District:

C. JARED CHICOINE

Category/
Type

2500.00

State: District:

7500.00

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)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. JARED CHICOINE

Mailing Address 22 BEECH ST
FL 3

City WOODSVILLE State NH Zip Code 03785

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 15 / 2014

Transaction ID : SB21B.I316

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. JARED CHICOINE

Mailing Address 22 BEECH ST
FL 3

City WOODSVILLE State NH Zip Code 03785

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 29 / 2014

Transaction ID : SB21B.I319

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. JARED CHICOINE

Mailing Address 22 BEECH ST
FL 3

City WOODSVILLE State NH Zip Code 03785

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 16 / 2014

Transaction ID : SB21B.I322

Amount of Each Disbursement this Period

3000.00

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

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

9000.00

☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

Liberty for All Action Fund

A. AARON PRICE

M M / D D / Y Y Y Y
07 02 2014

Category/
Type

3750.00

State: District:

B. AARON PRICE

07 / 17 / 2014

Category/
Type

3750.00

State: District:

C. AARON PRICE

Category/
Type

3750.00

State: District:

11250.00

☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

Liberty for All Action Fund

A. AARON PRICE

Category/
Type

3750.00

State: District:

B. AARON PRICE

Category/
Type

3750.00

State: District:

C. AARON PRICE

Category/
Type

3750.00

State: District:

11250.00

☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

Liberty for All Action Fund

A. JOHN RAMSEY

Category/
Type

231.17

State: District:

B. JOHN RAMSEY

MM / DD / YYYY

Category/
Type

76.14

State: District:

C. JOHN RAMSEY

Category/
Type

21.70

State: District:

329.01

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

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☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. BILL.COM

Mailing Address 3200 ASH ST

City	State	Zip Code
PALO ALTO	CA	94306

Purpose of Disbursement
ACCOUNTS PAYABLE SERVICE

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		23		2014

Transaction ID : SB21B.I273

Amount of Each Disbursement this Period

33.65

Full Name (Last, First, Middle Initial)

B. BILL.COM

Mailing Address 3200 ASH ST

City	State	Zip Code
PALO ALTO	CA	94306

Purpose of Disbursement
ACCOUNTS PAYABLE SERVICE

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

Date of Disbursement

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

Transaction ID : SB21B.I286

Amount of Each Disbursement this Period

34.81

Full Name (Last, First, Middle Initial)

C. BILL.COM

Mailing Address 3200 ASH ST

City	State	Zip Code
PALO ALTO	CA	94306

Purpose of Disbursement
ACCOUNTS PAYABLE SERVICE

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Transaction ID : SB21B.I299

Amount of Each Disbursement this Period

35.92

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

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

104.38

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

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. CASE CONSULTING SERVICE, INC.

Date of Disbursement

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

Mailing Address 700 MILLER AVE

City	State	Zip Code
GREAT FALLS	VA	22066

Transaction ID : SB21B.I242

Purpose of Disbursement
FUNDRAISING CONSULING

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

2	4	0	0	0	0								
---	---	---	---	---	---	--	--	--	--	--	--	--	--

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. CMDI

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	0			2	0	1	4		

Mailing Address 1593 SPRING HILL RD
SUITE 400

City	State	Zip Code
TYSONS CORNER	VA	22182

Transaction ID : SB21B.I250

Purpose of Disbursement
DIRECT MAIL SERVICES

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

7	8	0	0										
---	---	---	---	--	--	--	--	--	--	--	--	--	--

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. CMDI

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	0			2	0	1	4		

Mailing Address 1593 SPRING HILL RD
SUITE 400

City	State	Zip Code
TYSONS CORNER	VA	22182

Transaction ID : SB21B.I251

Purpose of Disbursement
DIRECT MAIL SERVICES

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1	0	5	7	0	0								
---	---	---	---	---	---	--	--	--	--	--	--	--	--

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

State: District:

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

2	5	8	3	7	0	0							
---	---	---	---	---	---	---	--	--	--	--	--	--	--

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

2	5	8	3	7	0	0							
---	---	---	---	---	---	---	--	--	--	--	--	--	--

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

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☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. ELAVON MERCHANT SERVICES

Date of Disbursement

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

Mailing Address 2 CONCOURSE PKWY
STE 800

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
CC PROCESSING

Candidate Name

Category/
Type

Transaction ID : SB21B.I263

Amount of Each Disbursement this Period

47.99

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. ELECTIONCFO, LLC

Date of Disbursement

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

Mailing Address PO BOX 26141

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
Type

Transaction ID : SB21B.I233

Amount of Each Disbursement this Period

2000.00

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. ELECTIONCFO, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		11		2014

Mailing Address PO BOX 26141

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
Type

Transaction ID : SB21B.I244

Amount of Each Disbursement this Period

4018.42

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

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

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

6066.41

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☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

NAME OF COMMITTEE (In Full)
Liberty for All Action Fund

A. FREEDOM PARTNERS

Date of Disbursement

Transaction ID : SB21B.I249

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. GOOGLE

Mailing Address 1600 AMPHITHEATRE PKWY

Date of Disbursement

07 / 03 / 2014

Transaction ID : SB21B.I264

Category/
Type

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. GOOGLE

Mailing Address 1600 AMPHITHEATRE PKWY

Date of Disbursement

Transaction ID : SB21B.I277

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

55.00

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

Age Group	Number of People
13-17	1610.00
18-24	~1000
25-34	~800
35-44	~600
45-54	~400
55-64	~300
65-74	~200
75-84	~100
85+	~50

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 PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. GOOGLE

Mailing Address 1600 AMPHITHEATRE PKWY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement
ONLINE SERVICE

Candidate Name

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

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2014

Transaction ID : SB21B.I293

Amount of Each Disbursement this Period

55.00

Full Name (Last, First, Middle Initial)

B. HALEY O'NEILL LLC

Mailing Address PO BOX 16015

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
RESEARCH

Candidate Name

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

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : SB21B.I237

Amount of Each Disbursement this Period

7000.00

Full Name (Last, First, Middle Initial)

C. HOLTZMAN VOGEL JOSEFIK PLLCMailing Address 45 N HILL DR
STE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement
LEGAL SERVICES

Candidate Name

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

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B.I232

Amount of Each Disbursement this Period

1693.75

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

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

8748.75

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

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☒ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. HOLTZMAN VOGEL JOSEFIK PLLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		17		2014

Mailing Address 45 N HILL DR
STE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement
LEGAL SERVICES

Candidate Name

Category/
Type

Transaction ID : SB21B.I253

Amount of Each Disbursement this Period

1025.00

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. INCORP SERVICES INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		12		2014

Mailing Address PO BOX 94438

City LAS VEGAS State NV Zip Code 89193

Purpose of Disbursement
REGISTERED AGENT

Candidate Name

Category/
Type

Transaction ID : SB21B.I245

Amount of Each Disbursement this Period

118.00

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. INCORP SERVICES INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2014

Mailing Address PO BOX 94438

City LAS VEGAS State NV Zip Code 89193

Purpose of Disbursement
REGISTERED AGENT

Candidate Name

Category/
Type

Transaction ID : SB21B.I247

Amount of Each Disbursement this Period

153.00

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

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

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

1296.00

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

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. INTUIT

Mailing Address 2632 MARINE WAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement
ACCOUNTING SOFTWARE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 28 2014

Transaction ID : SB21B.I274

Amount of Each Disbursement this Period

429.95

Full Name (Last, First, Middle Initial)

B. KAP STRATEGIES

Mailing Address 229 EVANS LN

City ALEXANDRIA State VA Zip Code 22305

Purpose of Disbursement
LIST RENTAL

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 31 2014

Transaction ID : SB21B.I241

Amount of Each Disbursement this Period

4725.00

Full Name (Last, First, Middle Initial)

C. KAP STRATEGIES

Mailing Address 229 EVANS LN

City ALEXANDRIA State VA Zip Code 22305

Purpose of Disbursement
DIRECT MAIL 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 07 2014

Transaction ID : SB21B.I347

Amount of Each Disbursement this Period

2885.00

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

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

8039.95

☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

Liberty for All Action Fund

A. KAP STRATEGIES

09 / 09 / 2014

Category/
Type

1130.00

State: District:

B. KAP STRATEGIES

MM / DD / YYYY

Category/
Type

16614.92

State: District:

C. KAP STRATEGIES

Category/
Type

2400.00

State: District:

20144.92

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

PAGE 30 OF 51

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. KNOWNHOST LLC

Mailing Address 1379 DILWORTHTOWN XING STE 214

City WEST CHESTER State PA Zip Code 19382

Purpose of Disbursement
WEBSITE EXPENSE

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 Y
07 21 2014

Transaction ID : SB21B.I272

Amount of Each Disbursement this Period

164.50

Full Name (Last, First, Middle Initial)

B. MANDO MEDIA LTD

Mailing Address 1112 WILLOW SPRINGS DR

City LOUISVILLE State KY Zip Code 78753

Purpose of Disbursement
IT SUPPORT

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 Y
07 31 2014

Transaction ID : SB21B.I238

Amount of Each Disbursement this Period

922.50

Full Name (Last, First, Middle Initial)

C. MANDO MEDIA LTD

Mailing Address 1112 WILLOW SPRINGS DR

City LOUISVILLE State KY Zip Code 78753

Purpose of Disbursement
IT SUPPORT

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 Y
08 07 2014

Transaction ID : SB21B.I243

Amount of Each Disbursement this Period

157.50

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

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

1244.50

☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

NAME OF COMMITTEE (In Full)
Liberty for All Action Fund

A. MERCHANT E-SOLUTIONS

Date of Disbursement



Transaction ID : SB21B.I265

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

Satisfaction Level	Percentage
Very satisfied	46.92
Not very satisfied	53.08

B. MERCHANT E-SOLUTIONS

Date of Disbursement

07 / 03 / 2014

Transaction ID : SB21B.I266

Category/
Type

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

Amount of Each Disbursement this Period

95.13

C. MERCHANT E-SOLUTIONS

Date of Disbursement

M M / D D / Y Y Y Y
08 07 2014

Transaction ID : SB21B.I280

Category/
Type

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

Amount of Each Disbursement this Period

47.19

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

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

189.24

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

PAGE 32 OF 51

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. MERCHANT E-SOLUTIONS

Mailing Address 3600 BRIDGE PKWY, SUITE 102

City REDWOOD CITY State CA Zip Code 94065

Purpose of Disbursement
CC PROCESSING

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 Y
08 07 2014

Transaction ID : SB21B.I281

Amount of Each Disbursement this Period

190.03

Full Name (Last, First, Middle Initial)

B. MERCHANT E-SOLUTIONS

Mailing Address 3600 BRIDGE PKWY, SUITE 102

City REDWOOD CITY State CA Zip Code 94065

Purpose of Disbursement
CC PROCESSING

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 Y
09 04 2014

Transaction ID : SB21B.I291

Amount of Each Disbursement this Period

45.87

Full Name (Last, First, Middle Initial)

C. MERCHANT E-SOLUTIONS

Mailing Address 3600 BRIDGE PKWY, SUITE 102

City REDWOOD CITY State CA Zip Code 94065

Purpose of Disbursement
CC PROCESSING

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 Y
09 04 2014

Transaction ID : SB21B.I292

Amount of Each Disbursement this Period

55.00

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

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

290.90

☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

Liberty for All Action Fund

A. SPECTRUM MARKETING COMPANIES

Date of Disbursement

Transaction ID : SB21B.I290

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

17612.16

Full Name (Last, First, Middle Initial)

B. SUREPAYROLL

Date of Disbursement

07 / 02 / 2014

Transaction ID : SB21B.I254

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

286.87

Full Name (Last, First, Middle Initial)

C. SUREPAYROLL

Date of Disbursement

Three digital displays are shown, each with a grid of small squares above the digits. The first display shows '07' with squares above the '0' and '7'. The second display shows '02' with squares above the '0' and '2'. The third display shows '2014' with squares above the '2', '0', '1', and '4'.

Transaction ID : SB21B.I255

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

33.88

17932.91

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

PAGE 35 OF 51

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. SUREPAYROLLMailing Address 2350 RAVINE WAY
STE 100

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement
EMPLOYER PAYROLL TAXES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB21B.I276

Amount of Each Disbursement this Period

286.87

Full Name (Last, First, Middle Initial)

B. SUREPAYROLLMailing Address 2350 RAVINE WAY
STE 100

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement
EMPLOYER PAYROLL TAXES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 15 2014

Transaction ID : SB21B.I283

Amount of Each Disbursement this Period

286.88

Full Name (Last, First, Middle Initial)

C. SUREPAYROLLMailing Address 2350 RAVINE WAY
STE 100

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement
PAYROLL PROCESSING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 15 2014

Transaction ID : SB21B.I284

Amount of Each Disbursement this Period

33.88

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

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

607.63

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

PAGE 37 OF 51

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. SUREPAYROLLMailing Address 2350 RAVINE WAY
STE 100

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement
PAYROLL PROCESSING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 16 / 2014

Transaction ID : SB21B.I296

Amount of Each Disbursement this Period

33.88

Full Name (Last, First, Middle Initial)

B. US POSTAL SERVICE

Mailing Address 475 L'ENFANT PLZ

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2014

Transaction ID : SB21B.I297

Amount of Each Disbursement this Period

10.10

Full Name (Last, First, Middle Initial)

C. VICI MEDIA GROUP

Mailing Address 816 BIG WOODS RD

City LONGVIEW State TX Zip Code 75605

Purpose of Disbursement
ONLINE SERVICE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 16 / 2014

Transaction ID : SB21B.I235

Amount of Each Disbursement this Period

2500.00

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

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

2543.98

☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

NAME OF COMMITTEE (In Full)
Liberty for All Action Fund

A. VICI MEDIA GROUP

Mailing Address 816 BIG WOODS RD

City	State	Zip Code
LONGVIEW	TX	75605

Purpose of Disbursement
ONLINE SERVICE

Candidate Name

Office Sought:	☐	House
	☐	Senate
	☐	President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.I239

Amount of Each Disbursement this Period

6665.00

Full Name (Last, First, Middle Initial)

B. WELLS FARGO

Mailing Address 420 MONTGOMERY ST

City	State	Zip Code
SAN FRANCISCO	CA	94104

Purpose of Disbursement
BANK CHARGE

Candidate Name	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	

Office Sought:	☐	House
	☐	Senate
	☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

Three digital displays showing the date 07/11/2014 in MM/DD/YYYY format. The first display shows '07' with 'M' indicators above it. The second display shows '11' with 'D' indicators above it. The third display shows '2014' with 'Y' indicators above it.

Transaction ID : SB21B.I268

Amount of Each Disbursement this Period

101.47

Full Name (Last, First, Middle Initial)

C. WELLS FARGO

Mailing Address 420 MONTGOMERY ST

City	State	Zip Code
SAN FRANCISCO	CA	94104

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought:	☐	House
	☐	Senate
	☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.I282

Amount of Each Disbursement this Period



83.08

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

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

6849.55

☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

NAME OF COMMITTEE (In Full)
Liberty for All Action Fund

A. WELLS FARGO



City	State	Zip Code
SAN FRANCISCO	CA	94104

Transaction ID : SB21B.I301

Amount of Each Disbursement this Period

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

5.00

B. WELLS FARGO

MM / DD / YYYY

City	State	Zip Code
SAN FRANCISCO	CA	94104

Transaction ID : SB21B.I302

Amount of Each Disbursement this Period

Category/
Type

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

5.00

C.

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

Amount of Each Disbursement this Period

Category/
Type

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

10.00

165679.47

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

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☐ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☒ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. JOHN RAMSEY

Mailing Address PO BOX 26141

City

ALEXANDRIA

State

VA

Zip Code

22313

Purpose of Disbursement

LOAN REPAYMENT

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
0	9		0	2		2014					

Transaction ID : SB26.I328

Amount of Each Disbursement this Period

										60000.00
--	--	--	--	--	--	--	--	--	--	----------

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

										60000.00
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										60000.00
--	--	--	--	--	--	--	--	--	--	----------

	21b		22		23		24		25		26
	27	X	28a		28b		28c		29		30b

Liberty for All Action Fund

A. ELAVON MERCHANT SERVICES

Mailing Address 2 CONCOURSE PKWY
STE 800

City	State	Zip Code
ATLANTA	GA	30328

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:	☐	House
	☐	Senate
	☐	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID : SB28A.I352

Amount of Each Disbursement this Period

195.00

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

Purpose of Disbursement

Candidate Name	Score
John Doe	85
Jane Smith	78
Michael Johnson	92
Sarah Williams	88
David Brown	75
Emily Davis	82
James Wilson	79
Alice Taylor	86
Robert Miller	77
Olivia Moore	83
William Clark	76
Isabella Hall	81
Benjamin King	74
Mia Green	87
Ethan White	73
Ava Black	84
Lucas Gray	72
Sophia Blue	89
Henry Red	71
Charlotte Yellow	80
Sebastian Purple	70
Liam Orange	86
Aria Silver	75
Noah Gold	82
Evelyn Bronze	74
Julian Platinum	88
Skylar Diamond	76
Christopher Ruby	83
Madison Sapphire	72
Christopher Emerald	80
Madison Amethyst	71
Christopher Garnet	85
Madison Topaz	73
Christopher Opal	81
Madison Pearl	70
Christopher Jade	87
Madison Onyx	75
Christopher Obsidian	82
Madison Quartz	74
Christopher Jasper	89
Madison Malachite	72
Christopher Turquoise	80
Madison Carnelian	71
Christopher Smoky Quartz	85
Madison Citrine	73
Christopher Amethyst	81
Madison Peridot	70
Christopher Labradorite	87
Madison Moonstone	75
Christopher Labradorite	82
Madison Labradorite	74
Christopher Labradorite	88
Madison Labradorite	76
Christopher Labradorite	83
Madison Labradorite	72
Christopher Labradorite	80
Madison Labradorite	71
Christopher Labradorite	85
Madison Labradorite	73
Christopher Labradorite	81
Madison Labradorite	70
Christopher Labradorite	87
Madison Labradorite	75
Christopher Labradorite	82
Madison Labradorite	74
Christopher Labradorite	89
Madison Labradorite	72
Christopher Labradorite	80
Madison Labradorite	71
Christopher Labradorite	85
Madison Labradorite	73
Christopher Labradorite	81
Madison Labradorite	70
Christopher Labradorite	87
Madison Labradorite	75
Christopher Labradorite	82
Madison Labradorite	74
Christopher Labradorite	89
Madison Labradorite	72
Christopher Labradorite	80
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Christopher Labradorite	85
Madison Labradorite	73
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Christopher Labradorite	81
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Christopher Labradorite	89
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Christopher Labradorite	80
Madison Labradorite	71
Christopher Labradorite	85
Madison Labradorite	73
Christopher Labradorite	81
Madison Labradorite	70
Christopher Labradorite	87
Madison Labradorite	75
Christopher Labradorite	82
Madison Labradorite	74
Christopher Labradorite	89
Madison Labradorite	72
Christopher Labradorite	80
Madison Labradorite	71
Christopher Labradorite	85
Madison Labradorite	73
Christopher Labradorite	81
Madison Labradorite	70
Christopher Labradorite	87
Madison Labradorite	75
Christopher Labradorite	82
Madison Labradorite	74
Christopher Labradorite	89
Madison Labradorite	72
Christopher Labradorite	80
Madison Labradorite	71
Christopher Labradorite	85
Madison Labradorite	73
Christopher Labradorite	81
Madison Labradorite	70
Christopher Labradorite	87
Madison Labradorite	75
Christopher Labradorite	82
Madison Labradorite	74
Christopher Labradorite	89
Madison Labradorite	72
Christopher Labradorite	80
Madison Labradorite	71
Christopher Labradorite	85
Madison Labradorite	73
Christopher Labradorite	81
Madison Labradorite	70
Christopher Labradorite	87
Madison Labradorite	75
Christopher Labradorite	82
Madison Labradorite	74
Christopher Labradorite	89
Madison Labradorite	72
Christopher Labradorite	80
Madison Labradorite	71
Christopher Labradorite	85
Madison Labradorite	73
Christopher Labradorite	81
Madison Labradorite	70
Christopher Labradorite	87
Madison Labradorite	75
Christopher Labradorite	82
Madison Labradorite	74
Christopher Labradorite	89
Madison Labradorite	72
Christopher Labradorite	80
Madison Labradorite	71
Christopher Labradorite	85
Madison Labradorite	73

Category/
Type

Office Sought:	☐	House
	☐	Senate
	☐	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:	☐	House
	☐	Senate
	☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Amount of Each Disbursement this Period

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

195.00

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

195.00

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 43 OF 51

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC.001

Liberty for All Action Fund

LOAN SOURCE Full Name (Last, First, Middle Initial)

JOHN RAMSEY

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address PO BOX 26141

City ALEXANDRIA

State VA

ZIP Code 22313

Original Amount of Loan

143200.00

Cumulative Payment To Date

60000.00

Balance Outstanding at Close of This Period

83200.00

TERMS

Date Incurred

M M M / D D D / Y Y Y Y Y Y
07 / 22 / 2013

Date Due

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

83200.00

TOTALS This Period (last page in this line only)..... ►

83200.00

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

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : SC.001

CONSOLIDATED NINE LOANS FROM THE SAME LENDER WITH THE SAME DUE DATE AND ADDED
ADDITIONAL 3 LOANS FROM THIS PERIOD TO BALANCE.

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 45 OF 51
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Liberty for All Action Fund			FEC IDENTIFICATION NUMBER ▼ C C00514653		
Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on / /					
Full Name of Payee EL TORO INTERNET MARKETING NON-CONTRIBUTION ACCOUNT			Date of Public Distribution/Dissemination / / 08 / 12 / 2014		
Mailing Address 300 DISTILLERY COMMONS STE 470			Amount 1500.00		
City LOUISVILLE		State KY	Zip Code 40206		Transaction ID : SE24.234
Purpose of Expenditure INTERNET ADVERTISING		Category/ Type		Date of Disbursement or Obligation / / 07 / 10 / 2014	
Name of Federal Candidate ANDREW WALTER			☒ Support ☐ Oppose		Office Sought: ☒ House District: 09 ☐ President ☐ Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought 31490.83			Disbursement For: ☒ Primary ☐ General 2014 ☐ Other (specify) ▶ _____		
Full Name of Payee EL TORO INTERNET MARKETING NON-CONTRIBUTION ACCOUNT			Date of Public Distribution/Dissemination / / 08 / 06 / 2014		
Mailing Address 300 DISTILLERY COMMONS STE 470			Amount 3000.00		
City LOUISVILLE		State KY	Zip Code 40206		Transaction ID : SE24.252
Purpose of Expenditure INTERNET ADVERTISING		Category/ Type		Date of Disbursement or Obligation / / 09 / 10 / 2014	
Name of Federal Candidate ANDREW WALTER			☒ Support ☐ Oppose		Office Sought: ☒ House District: 09 ☐ President ☐ Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought 31490.83			Disbursement For: ☒ Primary ☐ General 2014 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			4500.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
CHRIS MARSTON			[Electronically Filed]		Date / / 08 / 13 / 2014
Signature					

Full Name of Payee KAP STRATEGIES		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 31 / 2014	
Mailing Address 229 EVANS LN		Amount 563.00	
City ALEXANDRIA	State VA	Zip Code 22305	Transaction ID : SE24.345
Purpose of Expenditure VOTER TELEPHONE CONTACT		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 07 / 31 / 2014
Name of Federal Candidate JUSTIN AMASH		☒ Support ☐ Oppose	Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		1126.00	Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1105.10
(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.

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 48 OF 51
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Liberty for All Action Fund	FEC IDENTIFICATION NUMBER ▼ C C00514653
Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee KAP STRATEGIES			Date of Public Distribution/Dissemination 08 / 06 / 2014	
Mailing Address 229 EVANS LN			Amount 542.10	
City ALEXANDRIA	State VA	Zip Code 22305	Transaction ID : SE24.336 Date of Disbursement or Obligation 08 / 06 / 2014	
Purpose of Expenditure VOTER TELEPHONE CONTACT		Category/ Type		
Name of Federal Candidate ANDREW WALTER		☒ Support ☐ Oppose	Office Sought: ☒ House District: 09 ☐ President ☐ Senate State: AZ	
Calendar Year-To-Date Per Election for Office Sought		31490.83	Disbursement For: ☒ Primary ☐ General 2014 ☐ Other (specify) ▶	

Full Name of Payee KAP STRATEGIES			Date of Public Distribution/Dissemination 08 / 12 / 2014	
Mailing Address 229 EVANS LN			Amount 1050.00	
City ALEXANDRIA	State VA	Zip Code 22305	Transaction ID : SE24.337 Date of Disbursement or Obligation 08 / 12 / 2014	
Purpose of Expenditure VOTER TELEPHONE CONTACT		Category/ Type		
Name of Federal Candidate ANDREW WALTER		☒ Support ☐ Oppose	Office Sought: ☒ House District: 09 ☐ President ☐ Senate State: AZ	
Calendar Year-To-Date Per Election for Office Sought		31490.83	Disbursement For: ☒ Primary ☐ General 2014 ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1592.10
(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.

CHRIS MARSTON

[Electronically Filed]

Date

08

 /

07

 /

2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 49 OF 51
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Liberty for All Action Fund		FEC IDENTIFICATION NUMBER ▼ C C00514653
Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee KAP STRATEGIES		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 18 / 2014
Mailing Address 229 EVANS LN		Amount 1050.00
City ALEXANDRIA	State VA	Zip Code 22305
Purpose of Expenditure VOTER TELEPHONE CONTACT	Category/Type	Transaction ID : SE24.338 Date of Disbursement or Obligation MM / DD / YYYY 08 / 18 / 2014
Name of Federal Candidate ANDREW WALTER	☒ Support ☐ Oppose	Office Sought: ☒ House District: 09 ☐ President ☐ Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought 31490.83		Disbursement For: ☒ Primary ☐ General 2014 ☐ Other (specify) ▶

Full Name of Payee KAP STRATEGIES		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 19 / 2014
Mailing Address 229 EVANS LN		Amount 12656.63
City ALEXANDRIA	State VA	Zip Code 22305
Purpose of Expenditure VOTER MAIL	Category/Type	Transaction ID : SE24.344 Date of Disbursement or Obligation MM / DD / YYYY 08 / 19 / 2014
Name of Federal Candidate ANDREW WALTER	☒ Support ☐ Oppose	Office Sought: ☒ House District: 09 ☐ President ☐ Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought 31490.83		Disbursement For: ☒ Primary ☐ General 2014 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	13706.63
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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

CHRIS MARSTON

[Electronically Filed]

Signature

Date

MM / DD / YYYY
08 / 19 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 50 OF 51
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Liberty for All Action Fund	FEC IDENTIFICATION NUMBER ▼ C C00514653
Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on MM / DD / YYYY	

Full Name of Payee KAP STRATEGIES			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 21 / 2014	
Mailing Address 229 EVANS LN			Amount 1050.00	
City ALEXANDRIA	State VA	Zip Code 22305	Transaction ID : SE24.339	
Purpose of Expenditure VOTER TELEPHONE CONTACT		Category/ Type 	Date of Disbursement or Obligation MM / DD / YYYY 08 / 21 / 2014	
Name of Federal Candidate ANDREW WALTER		☒ Support ☐ Oppose	Office Sought: ☒ House District: 09 ☐ President ☐ Senate State: AZ	
Calendar Year-To-Date Per Election for Office Sought		31490.83	Disbursement For: ☒ Primary ☐ General 2014 ☐ Other (specify) ▶	

Full Name of Payee KAP STRATEGIES			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 23 / 2014	
Mailing Address 229 EVANS LN			Amount 1050.00	
City ALEXANDRIA	State VA	Zip Code 22305	Transaction ID : SE24.340	
Purpose of Expenditure VOTER TELEPHONE CONTACT		Category/ Type 	Date of Disbursement or Obligation MM / DD / YYYY 08 / 23 / 2014	
Name of Federal Candidate ANDREW WALTER		☒ Support ☐ Oppose	Office Sought: ☒ House District: 09 ☐ President ☐ Senate State: AZ	
Calendar Year-To-Date Per Election for Office Sought		31490.83	Disbursement For: ☒ Primary ☐ General 2014 ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	2100.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

CHRIS MARSTON

[Electronically Filed]

Signature

Date

MM / DD / YYYY
08 / 22 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 51 OF 51
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Liberty for All Action Fund			FEC IDENTIFICATION NUMBER ▼ C C00514653	
Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on MM / DD / YYYY				
Full Name of Payee KAP STRATEGIES			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 24 / 2014	
Mailing Address 229 EVANS LN			Amount 1050.00	
City ALEXANDRIA	State VA	Zip Code 22305	Transaction ID : SE24.341	
Purpose of Expenditure VOTER TELEPHONE CONTACT		Category/Type 	Date of Disbursement or Obligation MM / DD / YYYY 08 / 24 / 2014	
Name of Federal Candidate ANDREW WALTER		☒ Support ☐ Oppose	Office Sought: ☒ House District: 09 ☐ President ☐ Senate State: AZ	
Calendar Year-To-Date Per Election for Office Sought		31490.83	Disbursement For: ☒ Primary ☐ General 2014 ☐ Other (specify) ▶	
Full Name of Payee KAP STRATEGIES			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 25 / 2014	
Mailing Address 229 EVANS LN			Amount 1050.00	
City ALEXANDRIA	State VA	Zip Code 22305	Transaction ID : SE24.342	
Purpose of Expenditure VOTER TELEPHONE CONTACT		Category/Type 	Date of Disbursement or Obligation MM / DD / YYYY 08 / 25 / 2014	
Name of Federal Candidate ANDREW WALTER		☒ Support ☐ Oppose	Office Sought: ☒ House District: 09 ☐ President ☐ Senate State: AZ	
Calendar Year-To-Date Per Election for Office Sought		31490.83	Disbursement For: ☒ Primary ☐ General 2014 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			2100.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶				
(c) TOTAL Independent Expenditures..... ▶			32616.83	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
CHRIS MARSTON		[Electronically Filed]	Date MM / DD / YYYY 08 / 25 / 2014	
Signature				