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 –

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** 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)
- ☐ Mar 20 (M3)
- ☐ Apr 20 (M4)
- ☐ May 20 (M5)
- ☐ Jun 20 (M6)
- ☐ Jul 20 (M7)
- ☐ Aug 20 (M8)
- ☐ Sep 20 (M9)
- ☐ Oct 20 (M10)
- ☐ Nov 20 (M11) (Non-Election Year Only)
- ☐ Dec 20 (M12) (Non-Election Year Only)
- ☐ Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)

Election on M M / D D / Y Y Y Y in the State of

(d) 30-Day **POST**-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 01 / 01 / 2015 through 06 / 30 / 2015

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 10 / 21 / 2015

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

FE6AN026

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Rev. 02/2003)

Write or Type Committee Name

Liberty for All Action Fund

Report Covering the Period: From: 01 / 01 / 2015 To: 06 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		15884.12
(b) Cash on Hand at Beginning of Reporting Period	15884.12	
(c) Total Receipts (from Line 19)	233156.62	233156.62
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	249040.74	249040.74
7. Total Disbursements (from Line 31)	229611.13	229611.13
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	19429.61	19429.61
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)	76200.00	

☐ 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

Liberty for All Action Fund

Report Covering the Period: From: 01/01/2015 To: 06/30/2015

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)	1600.00	1600.00
(ii) Unitemized	115.00	115.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	1715.00	1715.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶	1715.00	1715.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	38000.00	38000.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	153.38	153.38
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	193288.24	193288.24
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)) ▶	233156.62	233156.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	233156.62	233156.62

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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	698.90	698.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	698.90	698.90
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	45000.00	45000.00
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	183912.23	183912.23
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))	229611.13	229611.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	229611.13	229611.13

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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)	1715.00	1715.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1715.00	1715.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	698.90	698.90
37. Offsets to Operating Expenditures (from Line 15, page 3)	153.38	153.38
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	545.52	545.52

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: **F3XA**
Transaction ID :

This amendment responds to a request for additional information dated September 17, 2015, noting an apparently excessive contribution. The contribution was inadvertently reported in the contribution account, rather than the non-contribution account. This amended report corrects the error.

Form/Schedule:
Transaction ID:

Image# 201510219003217505

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) — PAGE 7 OF 70

- [X] 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

A. Full Name (Last, First, Middle Initial)
KEVIN SPIERS

Mailing Address P.O. BOX 164123

City: AUSTIN | State: TX | Zip Code: 78716-

FEC ID number of contributing federal political committee: C

Name of Employer: PGA PROFFESSIONAL

Occupation: INFORMATION REQUESTED PER BEST EFF

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 01 / 10 / 2015

Transaction ID : SA11.1179

Amount of Each Receipt this Period: 100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KEVIN SPIERS

Mailing Address P.O. BOX 164123

City: AUSTIN | State: TX | Zip Code: 78716-

FEC ID number of contributing federal political committee: C

Name of Employer: PGA PROFFESSIONAL

Occupation: INFORMATION REQUESTED PER BEST EFF

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 02 / 16 / 2015

Transaction ID : SA11.1182

Amount of Each Receipt this Period: 100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KEVIN SPIERS

Mailing Address P.O. BOX 164123

City: AUSTIN | State: TX | Zip Code: 78716-

FEC ID number of contributing federal political committee: C

Name of Employer: PGA PROFFESSIONAL

Occupation: INFORMATION REQUESTED PER BEST EFF

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 03 / 16 / 2015

Transaction ID : SA11.1183

Amount of Each Receipt this Period: 100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

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

Image# 201510219003217506

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 70

- [X] 11a
- [ ] 11b
- [ ] 11c
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- [ ] 13
- [ ] 14
- [ ] 15
- [ ] 16
- [ ] 17

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

A. Full Name (Last, First, Middle Initial)
KEVIN SPIERS

Mailing Address P.O. BOX 164123

City: AUSTIN | State: TX | Zip Code: 78716-

FEC ID number of contributing federal political committee: C

Name of Employer: PGA PROFFESSIONAL

Occupation: INFORMATION REQUESTED PER BEST EFF

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 04 / 16 / 2015

Transaction ID : SA11.1186

Amount of Each Receipt this Period: 100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KEVIN SPIERS

Mailing Address P.O. BOX 164123

City: AUSTIN | State: TX | Zip Code: 78716-

FEC ID number of contributing federal political committee: C

Name of Employer: PGA PROFFESSIONAL

Occupation: INFORMATION REQUESTED PER BEST EFF

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 05 / 16 / 2015

Transaction ID : SA11.1188

Amount of Each Receipt this Period: 100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KEVIN SPIERS

Mailing Address P.O. BOX 164123

City: AUSTIN | State: TX | Zip Code: 78716-

FEC ID number of contributing federal political committee: C

Name of Employer: PGA PROFFESSIONAL

Occupation: INFORMATION REQUESTED PER BEST EFF

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 16 / 2015

Transaction ID : SA11.1194

Amount of Each Receipt this Period: 100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

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

Image# 201510219003217507

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) — PAGE 9 OF 70

- [X] 11a
- [ ] 11b
- [ ] 11c
- [ ] 12
- [ ] 13
- [ ] 14
- [ ] 15
- [ ] 16
- [ ] 17

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

A.
Full Name (Last, First, Middle Initial)
NICK STORK
Mailing Address 48 PARKS DRIVE
City: SHERBORN | State: MA | Zip Code: 01770-1226
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 ▼ 1000.00

Date of Receipt: 05 / 13 / 2015
Transaction ID : SA11.1187
Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	1600.00

Image# 201510219003217508

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

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

A. Full Name (Last, First, Middle Initial)
JOHN RAMSEY
Mailing Address P.O. 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 ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 38000.00
Date of Receipt: 01/21/2015
Transaction ID : SA13.451
Amount of Each Receipt this Period: 1000.00
LOAN

B. Full Name (Last, First, Middle Initial)
JOHN RAMSEY
Mailing Address P.O. 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 ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 38000.00
Date of Receipt: 01/26/2015
Transaction ID : SA13.452
Amount of Each Receipt this Period: 10000.00
LOAN

C. Full Name (Last, First, Middle Initial)
JOHN RAMSEY
Mailing Address P.O. 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 ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 38000.00
Date of Receipt: 05/26/2015
Transaction ID : SA13.457
Amount of Each Receipt this Period: 12000.00
LOAN

SUBTOTAL of Receipts This Page (optional) ▶ 23000.00

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

Image# 201510219003217509

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

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

A.
Full Name (Last, First, Middle Initial)
JOHN RAMSEY
Mailing Address P.O. 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 ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 38000.00

Date of Receipt: 06 / 11 / 2015
Transaction ID : SA13.458
Amount of Each Receipt this Period: 15000.00
LOAN

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) ▶ 15000.00

TOTAL This Period (last page this line number only) ▶ 38000.00

Image# 201510219003217510

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

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

A. Full Name (Last, First, Middle Initial)
PETER FARRELL
Mailing Address 7220 ROMERO DR
City: LA JOLLA | State: CA | Zip Code: 92037-5633
FEC ID number of contributing federal political committee: C
Name of Employer: RESMED | Occupation: EXECUTIVE
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 10000.00

Date of Receipt: 06 / 17 / 2015
Transaction ID : SA11.1195
Amount of Each Receipt this Period: 10000.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT

B. Full Name (Last, First, Middle Initial)
MR. RICHARD LEE
Mailing Address P.O. BOX 2113
City: ORLANDO | State: FL | Zip Code: 32802-2113
FEC ID number of contributing federal political committee: C
Name of Employer: FAMLEE INVESTMENT CO. | Occupation: EXECUTIVE
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 10000.00

Date of Receipt: 04 / 06 / 2015
Transaction ID : SA11.1184
Amount of Each Receipt this Period: 10000.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT

C. Full Name (Last, First, Middle Initial)
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 ▼: 7544.09

Date of Receipt: 01 / 26 / 2015
Transaction ID : SA17.412
Amount of Each Receipt this Period: 1261.75
LIST RENTAL

SUBTOTAL of Receipts This Page (optional) ▶ 21261.75

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

Image# 201510219003217511

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)
☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Liberty for All Action Fund

A. Full Name (Last, First, Middle Initial)
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 ▼ 7544.09

Date of Receipt: 02 / 10 / 2015
Transaction ID : SA17.442
Amount of Each Receipt this Period: 750.00
LIST RENTAL INCOME

B. Full Name (Last, First, Middle Initial)
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 ▼ 7544.09

Date of Receipt: 02 / 27 / 2015
Transaction ID : SA17.443
Amount of Each Receipt this Period: 1344.75
LIST RENTAL

C. Full Name (Last, First, Middle Initial)
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 ▼ 7544.09

Date of Receipt: 03 / 23 / 2015
Transaction ID : SA17.445
Amount of Each Receipt this Period: 103.24
LIST RENTAL

SUBTOTAL of Receipts This Page (optional) ▶ 2197.99

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

Image# 201510219003217512

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

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

A. Full Name (Last, First, Middle Initial)
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 ▼ 7544.09

Date of Receipt: 04 / 27 / 2015
Transaction ID : SA17.446

Amount of Each Receipt this Period: 125.00

LIST RENTAL

B. Full Name (Last, First, Middle Initial)
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 ▼ 7544.09

Date of Receipt: 06 / 11 / 2015
Transaction ID : SA17.448

Amount of Each Receipt this Period: 3959.35

LIST RENTAL

C. Full Name (Last, First, Middle Initial)
LIBERTY FOR ALL INC.

Mailing Address P.O. BOX 25394

City: ALEXANDRIA | State: VA | Zip Code: 22313-

FEC ID number of contributing federal political committee: C

Name of Employer | Occupation

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

Aggregate Year-to-Date ▼ 65714.05

Date of Receipt: 02 / 11 / 2015
Transaction ID : SA11.1198

Amount of Each Receipt this Period: 25000.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional) ▶ 29084.35

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

Image# 201510219003217513

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)
☐ 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

A. Full Name (Last, First, Middle Initial)
LIBERTY FOR ALL INC.
Mailing Address P.O. BOX 25394
City: ALEXANDRIA | State: VA | Zip Code: 22313-
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 65714.05

Date of Receipt: 02 / 12 / 2015
Transaction ID : SA11.1199
Amount of Each Receipt this Period: 25000.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT

B. Full Name (Last, First, Middle Initial)
LIBERTY FOR ALL INC.
Mailing Address P.O. BOX 25394
City: ALEXANDRIA | State: VA | Zip Code: 22313-
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 65714.05

Date of Receipt: 05 / 19 / 2015
Transaction ID : SA11.1204
Amount of Each Receipt this Period: 5679.05
CONTRIBUTION
NON CONTRIBUTION ACCOUNT

C. Full Name (Last, First, Middle Initial)
LIBERTY FOR ALL INC.
Mailing Address P.O. BOX 25394
City: ALEXANDRIA | State: VA | Zip Code: 22313-
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 65714.05

Date of Receipt: 05 / 26 / 2015
Transaction ID : SA11.1205
Amount of Each Receipt this Period: 10035.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional) ▶ 40714.05

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

Image# 201510219003217514

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)
☐ 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

A.
Full Name (Last, First, Middle Initial)
STERLING FOUNDATION MANAGEMENT
Mailing Address 2325 DULLES CORNER BLVD
STE 670
City: HERNDON State: VA Zip Code: 20171-
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 100000.00

Date of Receipt: 03 / 13 / 2015
Transaction ID : SA11.1203
Amount of Each Receipt this Period: 100000.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period:

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) ▶ 100000.00

TOTAL This Period (last page this line number only) ▶ 193258.14

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)

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

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

A.
Full Name (Last, First, Middle Initial)
CMDI

Mailing Address 1593 SPRING HILL RD STE 400
SUITE 400

City: TYSONS CORNER | State: VA | Zip Code: 22182

Purpose of Disbursement: DATABASE SERVICES

Candidate Name

Category/ Type

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

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

Date of Disbursement: 02 / 10 / 2015

Transaction ID : SB21B.I444

Amount of Each Disbursement this Period: 575.18

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
State: District:

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

Date of Disbursement: M M / D D / 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
State: District:

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

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 575.18

TOTAL This Period (last page this line number only) ▶ 575.18

Image# 201510219003217516

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

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

A. Full Name (Last, First, Middle Initial)
JOHN RAMSEY

Mailing Address P.O. BOX 26141

City: ALEXANDRIA State: VA Zip Code: 22313

Purpose of Disbursement: LOAN REPAYMENT

Candidate Name

Category/ Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Date of Disbursement: 02 / 11 / 2015

Transaction ID : SB26.I470

Amount of Each Disbursement this Period: 10000.00

B. Full Name (Last, First, Middle Initial)
JOHN RAMSEY

Mailing Address P.O. BOX 26141

City: ALEXANDRIA State: VA Zip Code: 22313

Purpose of Disbursement: LOAN REPAYMENT

Candidate Name

Category/ Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Date of Disbursement: 03 / 25 / 2015

Transaction ID : SB26.I471

Amount of Each Disbursement this Period: 15000.00

C. Full Name (Last, First, Middle Initial)
JOHN RAMSEY

Mailing Address P.O. BOX 26141

City: ALEXANDRIA State: VA Zip Code: 22313

Purpose of Disbursement: LOAN REPAYMENT

Candidate Name

Category/ Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Date of Disbursement: 04 / 14 / 2015

Transaction ID : SB26.I472

Amount of Each Disbursement this Period: 10000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 35000.00

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)

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

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

A.
Full Name (Last, First, Middle Initial)
JOHN RAMSEY

Mailing Address P.O. BOX 26141

City: ALEXANDRIA | State: VA | Zip Code: 22313

Purpose of Disbursement: LOAN REPAYMENT

Candidate Name

Category/ Type

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

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

Date of Disbursement: M M 04 / D D 17 / Y Y Y Y 2015

Transaction ID : SB26.I473

Amount of Each Disbursement this Period: 10000.00

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
State: District:

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

Date of Disbursement: M M / D D / 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
State: District:

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

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 10000.00

TOTAL This Period (last page this line number only) ▶ 45000.00

Image# 201510219003217518

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

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

A. Full Name (Last, First, Middle Initial)
AMANDA ANDERSON

Mailing Address 1712 E RIVERSIDE DR
APT 334

City: AUSTIN State: TX Zip Code: 78741

Purpose of Disbursement: FINANCE CONSULTING

Candidate Name

Category/ Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Date of Disbursement: 02 / 26 / 2015

Transaction ID : SB29.I465

Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
AMANDA ANDERSON

Mailing Address 1712 E RIVERSIDE DR
APT 334

City: AUSTIN State: TX Zip Code: 78741

Purpose of Disbursement: FINANCE CONSULTING

Candidate Name

Category/ Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Date of Disbursement: 04 / 13 / 2015

Transaction ID : SB29.I466

Amount of Each Disbursement this Period: 242.65

C. Full Name (Last, First, Middle Initial)
AMANDA ANDERSON

Mailing Address 1712 E RIVERSIDE DR
APT 334

City: AUSTIN State: TX Zip Code: 78741

Purpose of Disbursement: FINANCE CONSULTING

Candidate Name

Category/ Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Date of Disbursement: 04 / 22 / 2015

Transaction ID : SB29.I467

Amount of Each Disbursement this Period: 157.57

SUBTOTAL of Disbursements This Page (optional) ▶ 1400.22

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

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

A.
Full Name (Last, First, Middle Initial)
AMANDA ANDERSON
Mailing Address 1712 E RIVERSIDE DR
APT 334
City AUSTIN State TX Zip Code 78741
Purpose of Disbursement: FINANCE CONSULTING
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 06 / 15 / 2015
Transaction ID : SB29.I468
Amount of Each Disbursement this Period: 9.99

B.
Full Name (Last, First, Middle Initial)
AMANDA ANDERSON
Mailing Address 1712 E RIVERSIDE DR
APT 334
City AUSTIN State TX Zip Code 78741
Purpose of Disbursement: SALARY
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 03 / 16 / 2015
Transaction ID : SB29.I601
Amount of Each Disbursement this Period: 1750.00

C.
Full Name (Last, First, Middle Initial)
AMANDA ANDERSON
Mailing Address 1712 E RIVERSIDE DR
APT 334
City AUSTIN State TX Zip Code 78741
Purpose of Disbursement: SALARY
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 04 / 01 / 2015
Transaction ID : SB29.I607
Amount of Each Disbursement this Period: 1750.00

SUBTOTAL of Disbursements This Page (optional) ▶ 3509.99

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

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

A.
Full Name (Last, First, Middle Initial)
AMANDA ANDERSON
Mailing Address 1712 E RIVERSIDE DR
APT 334
City AUSTIN State TX Zip Code 78741
Purpose of Disbursement: SALARY
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 04 / 13 / 2015
Transaction ID : SB29.I613
Amount of Each Disbursement this Period: 1750.00

B.
Full Name (Last, First, Middle Initial)
AMANDA ANDERSON
Mailing Address 1712 E RIVERSIDE DR
APT 334
City AUSTIN State TX Zip Code 78741
Purpose of Disbursement: SALARY
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 05 / 01 / 2015
Transaction ID : SB29.I619
Amount of Each Disbursement this Period: 1750.00

C.
Full Name (Last, First, Middle Initial)
AMANDA ANDERSON
Mailing Address 1712 E RIVERSIDE DR
APT 334
City AUSTIN State TX Zip Code 78741
Purpose of Disbursement: SALARY
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 05 / 15 / 2015
Transaction ID : SB29.I625
Amount of Each Disbursement this Period: 1750.00

SUBTOTAL of Disbursements This Page (optional) ▶ 5250.00

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

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

A.
Full Name (Last, First, Middle Initial)
AMANDA ANDERSON
Mailing Address 1712 E RIVERSIDE DR
APT 334
City AUSTIN State TX Zip Code 78741
Purpose of Disbursement SALARY
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement M M 06 / D D 01 / Y Y Y Y 2015
Transaction ID : SB29.I631
Amount of Each Disbursement this Period 1750.00

B.
Full Name (Last, First, Middle Initial)
AMANDA ANDERSON
Mailing Address 1712 E RIVERSIDE DR
APT 334
City AUSTIN State TX Zip Code 78741
Purpose of Disbursement SALARY
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement M M 06 / D D 16 / Y Y Y Y 2015
Transaction ID : SB29.I637
Amount of Each Disbursement this Period 1750.00

C.
Full Name (Last, First, Middle Initial)
ANNE CASTEEL
Mailing Address 2226 WESTLAKE DR
#2-7
City AUSTIN State TX Zip Code 78746
Purpose of Disbursement FINANCE CONSULTING
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement M M 01 / D D 20 / Y Y Y Y 2015
Transaction ID : SB29.I581
Amount of Each Disbursement this Period 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

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

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

A. Full Name (Last, First, Middle Initial)
ANNE CASTEEL

Mailing Address 2226 WESTLAKE DR
#2-7

City: AUSTIN | State: TX | Zip Code: 78746

Purpose of Disbursement: FINANCE CONSULTING

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 01 / 30 / 2015

Transaction ID : SB29.I586

Amount of Each Disbursement this Period: 2500.00

B. Full Name (Last, First, Middle Initial)
ANNE CASTEEL

Mailing Address 2226 WESTLAKE DR
#2-7

City: AUSTIN | State: TX | Zip Code: 78746

Purpose of Disbursement: FINANCE CONSULTING

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 02 / 13 / 2015

Transaction ID : SB29.I591

Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
ANNE CASTEEL

Mailing Address 2226 WESTLAKE DR
#2-7

City: AUSTIN | State: TX | Zip Code: 78746

Purpose of Disbursement: FINANCE CONSULTING

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 02 / 27 / 2015

Transaction ID : SB29.I596

Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 7500.00

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)

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

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

A.
Full Name (Last, First, Middle Initial)
ANNE CASTEEL

Mailing Address 2226 WESTLAKE DR
#2-7

City: AUSTIN | State: TX | Zip Code: 78746

Purpose of Disbursement: FINANCE CONSULTING

Candidate Name

Category/ Type

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

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

Date of Disbursement: 03 / 16 / 2015

Transaction ID : SB29.I602

Amount of Each Disbursement this Period: 2500.00

B.
Full Name (Last, First, Middle Initial)
ANNE CASTEEL

Mailing Address 2226 WESTLAKE DR
#2-7

City: AUSTIN | State: TX | Zip Code: 78746

Purpose of Disbursement: FINANCE CONSULTING

Candidate Name

Category/ Type

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

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

Date of Disbursement: 04 / 01 / 2015

Transaction ID : SB29.I608

Amount of Each Disbursement this Period: 2500.00

C.
Full Name (Last, First, Middle Initial)
ANNE CASTEEL

Mailing Address 2226 WESTLAKE DR
#2-7

City: AUSTIN | State: TX | Zip Code: 78746

Purpose of Disbursement: FINANCE CONSULTING

Candidate Name

Category/ Type

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

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

Date of Disbursement: 04 / 13 / 2015

Transaction ID : SB29.I614

Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 7500.00

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

Image# 201510219003217524

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

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

A. Full Name (Last, First, Middle Initial)
ANNE CASTEEL

Mailing Address 2226 WESTLAKE DR
#2-7

City: AUSTIN State: TX Zip Code: 78746

Purpose of Disbursement: FINANCE CONSULTING

Candidate Name

Category/ Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Date of Disbursement: M M 05 / D D 01 / Y Y Y Y 2015

Transaction ID : SB29.I620

Amount of Each Disbursement this Period: 2500.00

B. Full Name (Last, First, Middle Initial)
ANNE CASTEEL

Mailing Address 2226 WESTLAKE DR
#2-7

City: AUSTIN State: TX Zip Code: 78746

Purpose of Disbursement: FINANCE CONSULTING

Candidate Name

Category/ Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Date of Disbursement: M M 05 / D D 15 / Y Y Y Y 2015

Transaction ID : SB29.I626

Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
ANNE CASTEEL

Mailing Address 2226 WESTLAKE DR
#2-7

City: AUSTIN State: TX Zip Code: 78746

Purpose of Disbursement: FINANCE CONSULTING

Candidate Name

Category/ Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Date of Disbursement: M M 06 / D D 01 / Y Y Y Y 2015

Transaction ID : SB29.I632

Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 7500.00

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

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

A. Full Name (Last, First, Middle Initial)
ANNE CASTEEL

Mailing Address 2226 WESTLAKE DR
#2-7

City: AUSTIN | State: TX | Zip Code: 78746

Purpose of Disbursement: FINANCE CONSULTING

Candidate Name:

Category/ Type:

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 06 / 16 / 2015

Transaction ID : SB29.I638

Amount of Each Disbursement this Period: 1250.00

B. Full Name (Last, First, Middle Initial)
JARED CHICOINE

Mailing Address 181 BENTON RD
UNIT 18

City: NORTH HAVERHILL | State: NH | Zip Code: 03774

Purpose of Disbursement: REIMBURSEMENT

Candidate Name:

Category/ Type:

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 04 / 22 / 2015

Transaction ID : SB29.I469

Amount of Each Disbursement this Period: 1094.00

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

Mailing Address 2702 LOVE FIELD DR

City: DALLAS | State: TX | Zip Code: 75235

Purpose of Disbursement:

Candidate Name:

Category/ Type:

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 04 / 21 / 2015

Transaction ID : SB29.I643

Amount of Each Disbursement this Period: 1094.00

[MEMO ITEM]
TRAVEL

SUBTOTAL of Disbursements This Page (optional) ▶ 2344.00

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)

21b | 22 | 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | X 29 | 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)
Liberty for All Action Fund

A. Full Name (Last, First, Middle Initial)
JARED CHICOINE

Mailing Address 181 BENTON RD
UNIT 18

City: NORTH HAVERHILL | State: NH | Zip Code: 03774

Purpose of Disbursement: STRATEGIC CONSULTING

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 01 / 20 / 2015

Transaction ID : SB29.I582

Amount of Each Disbursement this Period: 3000.00

B. Full Name (Last, First, Middle Initial)
JARED CHICOINE

Mailing Address 181 BENTON RD
UNIT 18

City: NORTH HAVERHILL | State: NH | Zip Code: 03774

Purpose of Disbursement: STRATEGIC CONSULTING

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 01 / 30 / 2015

Transaction ID : SB29.I587

Amount of Each Disbursement this Period: 3000.00

C. Full Name (Last, First, Middle Initial)
JARED CHICOINE

Mailing Address 181 BENTON RD
UNIT 18

City: NORTH HAVERHILL | State: NH | Zip Code: 03774

Purpose of Disbursement: STRATEGIC CONSULTING

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 02 / 13 / 2015

Transaction ID : SB29.I592

Amount of Each Disbursement this Period: 3000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 9000.00

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)

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

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

A.
Full Name (Last, First, Middle Initial)
JARED CHICOINE

Mailing Address 181 BENTON RD
UNIT 18

City: NORTH HAVERHILL | State: NH | Zip Code: 03774

Purpose of Disbursement: STRATEGIC CONSULTING

Candidate Name

Category/ Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 02 / 27 / 2015

Transaction ID : SB29.I597

Amount of Each Disbursement this Period: 3000.00

B.
Full Name (Last, First, Middle Initial)
JARED CHICOINE

Mailing Address 181 BENTON RD
UNIT 18

City: NORTH HAVERHILL | State: NH | Zip Code: 03774

Purpose of Disbursement: STRATEGIC CONSULTING

Candidate Name

Category/ Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 03 / 16 / 2015

Transaction ID : SB29.I603

Amount of Each Disbursement this Period: 3000.00

C.
Full Name (Last, First, Middle Initial)
JARED CHICOINE

Mailing Address 181 BENTON RD
UNIT 18

City: NORTH HAVERHILL | State: NH | Zip Code: 03774

Purpose of Disbursement: STRATEGIC CONSULTING

Candidate Name

Category/ Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 04 / 01 / 2015

Transaction ID : SB29.I609

Amount of Each Disbursement this Period: 3000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 9000.00

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)

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

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

A. Full Name (Last, First, Middle Initial)
JARED CHICOINE

Mailing Address 181 BENTON RD
UNIT 18

City: NORTH HAVERHILL | State: NH | Zip Code: 03774

Purpose of Disbursement: STRATEGIC CONSULTING

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 04 / 13 / 2015

Transaction ID : SB29.I615

Amount of Each Disbursement this Period: 3000.00

B. Full Name (Last, First, Middle Initial)
JARED CHICOINE

Mailing Address 181 BENTON RD
UNIT 18

City: NORTH HAVERHILL | State: NH | Zip Code: 03774

Purpose of Disbursement: STRATEGIC CONSULTING

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 05 / 01 / 2015

Transaction ID : SB29.I621

Amount of Each Disbursement this Period: 3000.00

C. Full Name (Last, First, Middle Initial)
JARED CHICOINE

Mailing Address 181 BENTON RD
UNIT 18

City: NORTH HAVERHILL | State: NH | Zip Code: 03774

Purpose of Disbursement: STRATEGIC CONSULTING

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 05 / 15 / 2015

Transaction ID : SB29.I627

Amount of Each Disbursement this Period: 3000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 9000.00

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

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

A. Full Name (Last, First, Middle Initial)
JARED CHICOINE

Mailing Address 181 BENTON RD
UNIT 18

City: NORTH HAVERHILL | State: NH | Zip Code: 03774

Purpose of Disbursement: STRATEGIC CONSULTING

Candidate Name

Category/ Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 06 / 01 / 2015

Transaction ID : SB29.I633

Amount of Each Disbursement this Period: 3000.00

B. Full Name (Last, First, Middle Initial)
JARED CHICOINE

Mailing Address 181 BENTON RD
UNIT 18

City: NORTH HAVERHILL | State: NH | Zip Code: 03774

Purpose of Disbursement: STRATEGIC CONSULTING

Candidate Name

Category/ Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 06 / 16 / 2015

Transaction ID : SB29.I639

Amount of Each Disbursement this Period: 3000.00

C. Full Name (Last, First, Middle Initial)
AARON PRICE

Mailing Address 415 HIGHWOOD DR

City: LOUISVILLE | State: KY | Zip Code: 40206

Purpose of Disbursement: SALARY

Candidate Name

Category/ Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 01 / 20 / 2015

Transaction ID : SB29.I583

Amount of Each Disbursement this Period: 3750.00

SUBTOTAL of Disbursements This Page (optional) ▶ 9750.00

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

Image# 201510219003217530

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

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

A. Full Name (Last, First, Middle Initial)
AARON PRICE

Mailing Address 415 HIGHWOOD DR

City: LOUISVILLE | State: KY | Zip Code: 40206

Purpose of Disbursement: SALARY

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 01 / 30 / 2015

Transaction ID : SB29.I588

Amount of Each Disbursement this Period: 3750.00

B. Full Name (Last, First, Middle Initial)
AARON PRICE

Mailing Address 415 HIGHWOOD DR

City: LOUISVILLE | State: KY | Zip Code: 40206

Purpose of Disbursement: SALARY

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 02 / 13 / 2015

Transaction ID : SB29.I593

Amount of Each Disbursement this Period: 3750.00

C. Full Name (Last, First, Middle Initial)
AARON PRICE

Mailing Address 415 HIGHWOOD DR

City: LOUISVILLE | State: KY | Zip Code: 40206

Purpose of Disbursement: SALARY

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 02 / 27 / 2015

Transaction ID : SB29.I598

Amount of Each Disbursement this Period: 3750.00

SUBTOTAL of Disbursements This Page (optional) ▶ 11250.00

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)

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

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

A.
Full Name (Last, First, Middle Initial)
AARON PRICE
Mailing Address 415 HIGHWOOD DR
City: LOUISVILLE | State: KY | Zip Code: 40206
Purpose of Disbursement: SALARY
Candidate Name
Category/ Type
Office Sought: House / Senate / President — State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 03 / 16 / 2015
Transaction ID : SB29.I604
Amount of Each Disbursement this Period: 3750.00

B.
Full Name (Last, First, Middle Initial)
AARON PRICE
Mailing Address 415 HIGHWOOD DR
City: LOUISVILLE | State: KY | Zip Code: 40206
Purpose of Disbursement: SALARY
Candidate Name
Category/ Type
Office Sought: House / Senate / President — State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 04 / 01 / 2015
Transaction ID : SB29.I610
Amount of Each Disbursement this Period: 3750.00

C.
Full Name (Last, First, Middle Initial)
AARON PRICE
Mailing Address 415 HIGHWOOD DR
City: LOUISVILLE | State: KY | Zip Code: 40206
Purpose of Disbursement: SALARY
Candidate Name
Category/ Type
Office Sought: House / Senate / President — State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 04 / 13 / 2015
Transaction ID : SB29.I616
Amount of Each Disbursement this Period: 3750.00

SUBTOTAL of Disbursements This Page (optional) ▶ 11250.00

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)

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

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

A.
Full Name (Last, First, Middle Initial)
AARON PRICE
Mailing Address 415 HIGHWOOD DR
City: LOUISVILLE | State: KY | Zip Code: 40206
Purpose of Disbursement: SALARY
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 05 / 01 / 2015
Transaction ID : SB29.I622
Amount of Each Disbursement this Period: 3750.00

B.
Full Name (Last, First, Middle Initial)
AARON PRICE
Mailing Address 415 HIGHWOOD DR
City: LOUISVILLE | State: KY | Zip Code: 40206
Purpose of Disbursement: SALARY
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 05 / 15 / 2015
Transaction ID : SB29.I628
Amount of Each Disbursement this Period: 3750.00

C.
Full Name (Last, First, Middle Initial)
AARON PRICE
Mailing Address 415 HIGHWOOD DR
City: LOUISVILLE | State: KY | Zip Code: 40206
Purpose of Disbursement: SALARY
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 06 / 01 / 2015
Transaction ID : SB29.I634
Amount of Each Disbursement this Period: 3750.00

SUBTOTAL of Disbursements This Page (optional) ▶ 11250.00

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

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

A.
Full Name (Last, First, Middle Initial)
AARON PRICE
Mailing Address 415 HIGHWOOD DR
City: LOUISVILLE State: KY Zip Code: 40206
Purpose of Disbursement: SALARY
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 06 / 16 / 2015
Transaction ID : SB29.I640
Amount of Each Disbursement this Period: 3750.00

B.
Full Name (Last, First, Middle Initial)
ARC DOCUMENT SOLUTIONS
Mailing Address 4107 S. CAPITAL OF TEXAS HWY
City: AUSTIN State: TX Zip Code: 78704
Purpose of Disbursement: PRINTING
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 04 / 17 / 2015
Transaction ID : SB29.I515
Amount of Each Disbursement this Period: 1792.76

C.
Full Name (Last, First, Middle Initial)
ARC DOCUMENT SOLUTIONS
Mailing Address 4107 S. CAPITAL OF TEXAS HWY
City: AUSTIN State: TX Zip Code: 78704
Purpose of Disbursement: PRINTING
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 05 / 11 / 2015
Transaction ID : SB29.I516
Amount of Each Disbursement this Period: 422.44

SUBTOTAL of Disbursements This Page (optional) ▶ 5965.20

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

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

A. Full Name (Last, First, Middle Initial)
AT&T EXECUTIVE EDUCATION & CONFERENCE CENTER

Mailing Address 1900 UNIVERSITY AVE

City: AUSTIN | State: TX | Zip Code: 78705

Purpose of Disbursement: VENUE AND CATERING

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 04 / 28 / 2015

Transaction ID : SB29.I560

Amount of Each Disbursement this Period: 5494.72

B. Full Name (Last, First, Middle Initial)
AT&T EXECUTIVE EDUCATION & CONFERENCE CENTER

Mailing Address 1900 UNIVERSITY AVE

City: AUSTIN | State: TX | Zip Code: 78705

Purpose of Disbursement: VENUE & CATERING

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 04 / 28 / 2015

Transaction ID : SB29.I561

Amount of Each Disbursement this Period: 4103.20

C. Full Name (Last, First, Middle Initial)
C3 STRATEGIES, LLC

Mailing Address 1108 LAVACA ST #110-329

City: AUSTIN | State: TX | Zip Code: 78701

Purpose of Disbursement: PUBLIC AFFAIRS CONSULTING

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 06 / 01 / 2015

Transaction ID : SB29.I482

Amount of Each Disbursement this Period: 10000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 19597.92

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

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

A. Full Name (Last, First, Middle Initial)
CMDI

Mailing Address 1593 SPRING HILL RD STE 400
SUITE 400

City: TYSONS CORNER | State: VA | Zip Code: 22182

Purpose of Disbursement: DATA ENTRY & CAGING

Candidate Name

Category/ Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 03 / 05 / 2015

Transaction ID : SB29.I490

Amount of Each Disbursement this Period: 4167.97

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

Mailing Address 1593 SPRING HILL RD STE 400
SUITE 400

City: TYSONS CORNER | State: VA | Zip Code: 22182

Purpose of Disbursement: DATABASE SERVICES

Candidate Name

Category/ Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 01 / 21 / 2015

Transaction ID : SB29.I491

Amount of Each Disbursement this Period: 500.00

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

Mailing Address 1593 SPRING HILL RD STE 400
SUITE 400

City: TYSONS CORNER | State: VA | Zip Code: 22182

Purpose of Disbursement: DATABASE SERVICES

Candidate Name

Category/ Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 02 / 19 / 2015

Transaction ID : SB29.I492

Amount of Each Disbursement this Period: 500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 5167.97

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

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

A. Full Name (Last, First, Middle Initial)
CMDI

Mailing Address 1593 SPRING HILL RD STE 400
SUITE 400

City: TYSONS CORNER | State: VA | Zip Code: 22182

Purpose of Disbursement: DATABASE SERVICES

Candidate Name

Category/ Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 03 / 19 / 2015

Transaction ID : SB29.I493

Amount of Each Disbursement this Period: 500.00

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

Mailing Address 1593 SPRING HILL RD STE 400
SUITE 400

City: TYSONS CORNER | State: VA | Zip Code: 22182

Purpose of Disbursement: DATABASE SERVICES

Candidate Name

Category/ Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 04 / 21 / 2015

Transaction ID : SB29.I494

Amount of Each Disbursement this Period: 500.00

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

Mailing Address 1593 SPRING HILL RD STE 400
SUITE 400

City: TYSONS CORNER | State: VA | Zip Code: 22182

Purpose of Disbursement: CC PROCESSING

Candidate Name

Category/ Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 04 / 28 / 2015

Transaction ID : SB29.I495

Amount of Each Disbursement this Period: 20.60

SUBTOTAL of Disbursements This Page (optional) ▶ 1020.60

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

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

A. Full Name (Last, First, Middle Initial)
CMDI

Mailing Address 1593 SPRING HILL RD STE 400
SUITE 400

City: TYSONS CORNER | State: VA | Zip Code: 22182

Purpose of Disbursement: DATABASE SERVICES

Candidate Name

Category/ Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 05 / 19 / 2015

Transaction ID : SB29.I496

Amount of Each Disbursement this Period: 500.00

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

Mailing Address 1593 SPRING HILL RD STE 400
SUITE 400

City: TYSONS CORNER | State: VA | Zip Code: 22182

Purpose of Disbursement: CC PROCESSING

Candidate Name

Category/ Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 05 / 21 / 2015

Transaction ID : SB29.I497

Amount of Each Disbursement this Period: 49.25

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

Mailing Address 1593 SPRING HILL RD STE 400
SUITE 400

City: TYSONS CORNER | State: VA | Zip Code: 22182

Purpose of Disbursement: CC PROCESSING

Candidate Name

Category/ Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 05 / 27 / 2015

Transaction ID : SB29.I498

Amount of Each Disbursement this Period: 5.15

SUBTOTAL of Disbursements This Page (optional) ▶ 554.40

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)

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

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

A. Full Name (Last, First, Middle Initial)
CMDI

Mailing Address 1593 SPRING HILL RD STE 400
SUITE 400

City: TYSONS CORNER | State: VA | Zip Code: 22182

Purpose of Disbursement: DATABASE SERVICES

Candidate Name

Category/ Type

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

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

Date of Disbursement: 06 / 19 / 2015

Transaction ID : SB29.I499

Amount of Each Disbursement this Period: 500.00

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

Mailing Address 1593 SPRING HILL RD STE 400
SUITE 400

City: TYSONS CORNER | State: VA | Zip Code: 22182

Purpose of Disbursement: CC PROCESSING

Candidate Name

Category/ Type

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

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

Date of Disbursement: 06 / 25 / 2015

Transaction ID : SB29.I500

Amount of Each Disbursement this Period: 5.15

C. Full Name (Last, First, Middle Initial)
DELTA AIRLINES

Mailing Address 1030 DELTA BLVD

City: ATLANTA | State: GA | Zip Code: 30320

Purpose of Disbursement: TRAVEL

Candidate Name

Category/ Type

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

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

Date of Disbursement: 03 / 31 / 2015

Transaction ID : SB29.I474

Amount of Each Disbursement this Period: 1011.40

SUBTOTAL of Disbursements This Page (optional) ▶ 1516.55

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

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

A. Full Name (Last, First, Middle Initial)
DINSMORE & SHOHL LLP

Mailing Address P.O. BOX 640635

City: CINCINNATI | State: OH | Zip Code: 45264-0635

Purpose of Disbursement: LEGAL SERVICES

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 06 / 15 / 2015

Transaction ID : SB29.I559

Amount of Each Disbursement this Period: 3200.00

B. Full Name (Last, First, Middle Initial)
DOMAIN.COM LLC

Mailing Address 70 BLANCHARD RD FL 3

City: BURLINGTON | State: MA | Zip Code: 01803

Purpose of Disbursement: WEBSITE EXPENSE

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 04 / 08 / 2015

Transaction ID : SB29.I520

Amount of Each Disbursement this Period: 51.96

C. Full Name (Last, First, Middle Initial)
DOMAIN.COM LLC

Mailing Address 70 BLANCHARD RD FL 3

City: BURLINGTON | State: MA | Zip Code: 01803

Purpose of Disbursement: WEBSITE EXPENSE

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 04 / 09 / 2015

Transaction ID : SB29.I521

Amount of Each Disbursement this Period: 11.49

SUBTOTAL of Disbursements This Page (optional) ▶ 3263.45

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

Image# 201510219003217540

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

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

A. Full Name (Last, First, Middle Initial)
DOMAIN.COM LLC

Mailing Address 70 BLANCHARD RD FL 3

City: BURLINGTON | State: MA | Zip Code: 01803

Purpose of Disbursement: WEBSITE EXPENSE

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 04 / 09 / 2015

Transaction ID : SB29.I522

Amount of Each Disbursement this Period: 11.49

B. Full Name (Last, First, Middle Initial)
DOMAIN.COM LLC

Mailing Address 70 BLANCHARD RD FL 3

City: BURLINGTON | State: MA | Zip Code: 01803

Purpose of Disbursement: WEBSITE EXPENSE

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 06 / 05 / 2015

Transaction ID : SB29.I523

Amount of Each Disbursement this Period: 29.99

C. Full Name (Last, First, Middle Initial)
DOMAIN.COM LLC

Mailing Address 70 BLANCHARD RD FL 3

City: BURLINGTON | State: MA | Zip Code: 01803

Purpose of Disbursement: WEBSITE EXPENSE

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 06 / 05 / 2015

Transaction ID : SB29.I524

Amount of Each Disbursement this Period: 11.49

SUBTOTAL of Disbursements This Page (optional) ▶ 52.97

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)

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

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

A.
Full Name (Last, First, Middle Initial)
DOMAIN.COM LLC
Mailing Address 70 BLANCHARD RD FL 3
City: BURLINGTON | State: MA | Zip Code: 01803
Purpose of Disbursement: WEBSITE EXPENSE
Candidate Name
Category/ Type
Office Sought: House / Senate / President | State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 06 / 05 / 2015
Transaction ID : SB29.I525
Amount of Each Disbursement this Period: 11.49

B.
Full Name (Last, First, Middle Initial)
DOMAIN.COM LLC
Mailing Address 70 BLANCHARD RD FL 3
City: BURLINGTON | State: MA | Zip Code: 01803
Purpose of Disbursement: WEBSITE EXPENSE
Candidate Name
Category/ Type
Office Sought: House / Senate / President | State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 06 / 05 / 2015
Transaction ID : SB29.I526
Amount of Each Disbursement this Period: 12.49

C.
Full Name (Last, First, Middle Initial)
DOMAIN.COM LLC
Mailing Address 70 BLANCHARD RD FL 3
City: BURLINGTON | State: MA | Zip Code: 01803
Purpose of Disbursement: WEBSITE EXPENSE
Candidate Name
Category/ Type
Office Sought: House / Senate / President | State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 06 / 05 / 2015
Transaction ID : SB29.I527
Amount of Each Disbursement this Period: 29.99

SUBTOTAL of Disbursements This Page (optional) ▶ 53.97

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)

21b | 22 | 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | X 29 | 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)
Liberty for All Action Fund

A.
Full Name (Last, First, Middle Initial)
DOMAIN.COM LLC
Mailing Address 70 BLANCHARD RD FL 3
City: BURLINGTON | State: MA | Zip Code: 01803
Purpose of Disbursement: WEBSITE EXPENSE
Candidate Name
Category/ Type
Office Sought: House / Senate / President | State: | District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 06 / 08 / 2015
Transaction ID : SB29.I528
Amount of Each Disbursement this Period: 29.99

B.
Full Name (Last, First, Middle Initial)
DOMAIN.COM LLC
Mailing Address 70 BLANCHARD RD FL 3
City: BURLINGTON | State: MA | Zip Code: 01803
Purpose of Disbursement: WEBSITE EXPENSE
Candidate Name
Category/ Type
Office Sought: House / Senate / President | State: | District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 06 / 08 / 2015
Transaction ID : SB29.I529
Amount of Each Disbursement this Period: 90.93

C.
Full Name (Last, First, Middle Initial)
DOMAIN.COM LLC
Mailing Address 70 BLANCHARD RD FL 3
City: BURLINGTON | State: MA | Zip Code: 01803
Purpose of Disbursement: WEBSITE EXPENSE
Candidate Name
Category/ Type
Office Sought: House / Senate / President | State: | District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 06 / 08 / 2015
Transaction ID : SB29.I530
Amount of Each Disbursement this Period: 29.99

SUBTOTAL of Disbursements This Page (optional) ▶ 150.91

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)

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

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

A.
Full Name (Last, First, Middle Initial)
DOMAIN.COM LLC
Mailing Address 70 BLANCHARD RD FL 3
City: BURLINGTON | State: MA | Zip Code: 01803
Purpose of Disbursement: WEBSITE EXPENSE
Candidate Name
Category/ Type
Office Sought: House / Senate / President — State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 06 / 22 / 2015
Transaction ID : SB29.I531
Amount of Each Disbursement this Period: 29.99

B.
Full Name (Last, First, Middle Initial)
DOMAIN.COM LLC
Mailing Address 70 BLANCHARD RD FL 3
City: BURLINGTON | State: MA | Zip Code: 01803
Purpose of Disbursement: WEBSITE EXPENSE
Candidate Name
Category/ Type
Office Sought: House / Senate / President — State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 06 / 22 / 2015
Transaction ID : SB29.I532
Amount of Each Disbursement this Period: 29.99

C.
Full Name (Last, First, Middle Initial)
DOMAIN.COM LLC
Mailing Address 70 BLANCHARD RD FL 3
City: BURLINGTON | State: MA | Zip Code: 01803
Purpose of Disbursement: WEBSITE EXPENSE
Candidate Name
Category/ Type
Office Sought: House / Senate / President — State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 06 / 22 / 2015
Transaction ID : SB29.I533
Amount of Each Disbursement this Period: 29.99

SUBTOTAL of Disbursements This Page (optional) ▶ 89.97

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)

21b | 22 | 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | X 29 | 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)
Liberty for All Action Fund

A.
Full Name (Last, First, Middle Initial)
DOMAIN.COM LLC
Mailing Address 70 BLANCHARD RD FL 3
City: BURLINGTON | State: MA | Zip Code: 01803
Purpose of Disbursement: WEBSITE EXPENSE
Candidate Name
Category/ Type
Office Sought: House / Senate / President — State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 06 / 23 / 2015
Transaction ID : SB29.I534
Amount of Each Disbursement this Period: 11.49

B.
Full Name (Last, First, Middle Initial)
DOMAIN.COM LLC
Mailing Address 70 BLANCHARD RD FL 3
City: BURLINGTON | State: MA | Zip Code: 01803
Purpose of Disbursement: WEBSITE EXPENSE
Candidate Name
Category/ Type
Office Sought: House / Senate / President — State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 06 / 23 / 2015
Transaction ID : SB29.I535
Amount of Each Disbursement this Period: 11.49

C.
Full Name (Last, First, Middle Initial)
DOMAIN.COM LLC
Mailing Address 70 BLANCHARD RD FL 3
City: BURLINGTON | State: MA | Zip Code: 01803
Purpose of Disbursement: WEBSITE EXPENSE
Candidate Name
Category/ Type
Office Sought: House / Senate / President — State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 06 / 23 / 2015
Transaction ID : SB29.I536
Amount of Each Disbursement this Period: 11.49

SUBTOTAL of Disbursements This Page (optional) ▶ 34.47

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)

21b | 22 | 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | X 29 | 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)
Liberty for All Action Fund

A.
Full Name (Last, First, Middle Initial)
DOMAIN.COM LLC
Mailing Address 70 BLANCHARD RD FL 3
City: BURLINGTON | State: MA | Zip Code: 01803
Purpose of Disbursement: WEBSITE EXPENSE
Candidate Name
Category/ Type
Office Sought: House / Senate / President — State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 06 / 23 / 2015
Transaction ID : SB29.I537
Amount of Each Disbursement this Period: 11.49

B.
Full Name (Last, First, Middle Initial)
DOMAIN.COM LLC
Mailing Address 70 BLANCHARD RD FL 3
City: BURLINGTON | State: MA | Zip Code: 01803
Purpose of Disbursement: WEBSITE EXPENSE
Candidate Name
Category/ Type
Office Sought: House / Senate / President — State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 06 / 23 / 2015
Transaction ID : SB29.I538
Amount of Each Disbursement this Period: 116.91

C.
Full Name (Last, First, Middle Initial)
DOMAIN.COM LLC
Mailing Address 70 BLANCHARD RD FL 3
City: BURLINGTON | State: MA | Zip Code: 01803
Purpose of Disbursement: WEBSITE EXPENSE
Candidate Name
Category/ Type
Office Sought: House / Senate / President — State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 06 / 23 / 2015
Transaction ID : SB29.I539
Amount of Each Disbursement this Period: 11.49

SUBTOTAL of Disbursements This Page (optional) ▶ 139.89

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)

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

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

A. Full Name (Last, First, Middle Initial)
DOMAIN.COM LLC

Mailing Address 70 BLANCHARD RD FL 3

City: BURLINGTON | State: MA | Zip Code: 01803

Purpose of Disbursement: WEBSITE EXPENSE

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 06 / 23 / 2015

Transaction ID : SB29.I540

Amount of Each Disbursement this Period: 11.49

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

Mailing Address 7930 JONES BRANCH DR STE 1100

City: MCLEAN | State: VA | Zip Code: 22102

Purpose of Disbursement: TRAVEL

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 04 / 21 / 2015

Transaction ID : SB29.I562

Amount of Each Disbursement this Period: 435.90

C. Full Name (Last, First, Middle Initial)
ELECTIONCFO, LLC

Mailing Address P.O. BOX 26141

City: ALEXANDRIA | State: VA | Zip Code: 22313-6141

Purpose of Disbursement: COMPLIANCE CONSULTING

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 01 / 29 / 2015

Transaction ID : SB29.I554

Amount of Each Disbursement this Period: 2000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 2447.39

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

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

A.
Full Name (Last, First, Middle Initial)
ELECTIONCFO, LLC
Mailing Address P.O. BOX 26141
City ALEXANDRIA State VA Zip Code 22313-6141
Purpose of Disbursement: COMPLIANCE CONSULTING
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: M M 02 / D D 13 / Y Y Y Y 2015
Transaction ID : SB29.I555
Amount of Each Disbursement this Period: 2000.00

B.
Full Name (Last, First, Middle Initial)
ELECTIONCFO, LLC
Mailing Address P.O. BOX 26141
City ALEXANDRIA State VA Zip Code 22313-6141
Purpose of Disbursement: COMPLIANCE CONSULTING
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: M M 03 / D D 17 / Y Y Y Y 2015
Transaction ID : SB29.I556
Amount of Each Disbursement this Period: 2000.00

C.
Full Name (Last, First, Middle Initial)
ELECTIONCFO, LLC
Mailing Address P.O. BOX 26141
City ALEXANDRIA State VA Zip Code 22313-6141
Purpose of Disbursement: COMPLIANCE CONSULTING
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: M M 04 / D D 23 / Y Y Y Y 2015
Transaction ID : SB29.I557
Amount of Each Disbursement this Period: 2000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

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

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

A. Full Name (Last, First, Middle Initial)
ELECTIONCFO, LLC

Mailing Address P.O. BOX 26141

City: ALEXANDRIA | State: VA | Zip Code: 22313-6141

Purpose of Disbursement: COMPLIANCE CONSULTING

Candidate Name:

Category/ Type:

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 05 / 08 / 2015

Transaction ID : SB29.I558

Amount of Each Disbursement this Period: 2000.00

B. Full Name (Last, First, Middle Initial)
FREE STATE PROJECT IN

Mailing Address 816 ELM ST #351

City: MANCHESTER | State: NH | Zip Code: 03101

Purpose of Disbursement: EVENT SPONSORSHIP

Candidate Name:

Category/ Type:

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 02 / 24 / 2015

Transaction ID : SB29.I545

Amount of Each Disbursement this Period: 1500.00

C. Full Name (Last, First, Middle Initial)
GODADDY.COM

Mailing Address 14455 N HAYDEN RD STE 219

City: SCOTTSDALE | State: AZ | Zip Code: 85260

Purpose of Disbursement: WEBSITE EXPENSE

Candidate Name:

Category/ Type:

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 01 / 16 / 2015

Transaction ID : SB29.I489

Amount of Each Disbursement this Period: 273.22

SUBTOTAL of Disbursements This Page (optional) ▶ 3773.22

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

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

A. Full Name (Last, First, Middle Initial)
GOOGLE

Mailing Address 1600 AMPHITHEATRE PARKWAY

City: MOUNTAIN VIEW | State: CA | Zip Code: 94043

Purpose of Disbursement: ONLINE SERVICE

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 01 / 05 / 2015

Transaction ID : SB29.I501

Amount of Each Disbursement this Period: 55.00

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

Mailing Address 1600 AMPHITHEATRE PARKWAY

City: MOUNTAIN VIEW | State: CA | Zip Code: 94043

Purpose of Disbursement: ONLINE APPS

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 02 / 03 / 2015

Transaction ID : SB29.I502

Amount of Each Disbursement this Period: 55.00

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

Mailing Address 1600 AMPHITHEATRE PARKWAY

City: MOUNTAIN VIEW | State: CA | Zip Code: 94043

Purpose of Disbursement: ONLINE APP

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 03 / 05 / 2015

Transaction ID : SB29.I503

Amount of Each Disbursement this Period: 55.71

SUBTOTAL of Disbursements This Page (optional) ▶ 165.71

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

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

A. Full Name (Last, First, Middle Initial)
GOOGLE

Mailing Address 1600 AMPHITHEATRE PARKWAY

City: MOUNTAIN VIEW | State: CA | Zip Code: 94043

Purpose of Disbursement: ONLINE APP

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 04 / 06 / 2015

Transaction ID : SB29.I504

Amount of Each Disbursement this Period: 60.00

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

Mailing Address 1600 AMPHITHEATRE PARKWAY

City: MOUNTAIN VIEW | State: CA | Zip Code: 94043

Purpose of Disbursement: ONLINE APP

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 05 / 06 / 2015

Transaction ID : SB29.I505

Amount of Each Disbursement this Period: 60.00

C. Full Name (Last, First, Middle Initial)
KARMAKAZE PRODUCTIONS

Mailing Address 4300 MANZANILLO DR

City: AUSTIN | State: TX | Zip Code: 78749

Purpose of Disbursement: VIDEO PRODUCTION SERVICES

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 06 / 29 / 2015

Transaction ID : SB29.I517

Amount of Each Disbursement this Period: 1184.81

SUBTOTAL of Disbursements This Page (optional) ▶ 1304.81

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

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

A. Full Name (Last, First, Middle Initial)
KARMAKAZE PRODUCTIONS

Mailing Address 4300 MANZANILLO DR

City: AUSTIN | State: TX | Zip Code: 78749

Purpose of Disbursement: ADVERTISING PRODUCTION

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 04 / 06 / 2015

Transaction ID : SB29.I518

Amount of Each Disbursement this Period: 850.00

B. Full Name (Last, First, Middle Initial)
KNOWNHOST LLC

Mailing Address 1379 DILWORTH TOWN XING STE 214

City: WEST CHESTER | State: PA | Zip Code: 19382

Purpose of Disbursement: WEBSITE EXPENSE

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 01 / 20 / 2015

Transaction ID : SB29.I487

Amount of Each Disbursement this Period: 164.50

C. Full Name (Last, First, Middle Initial)
KNOWNHOST LLC

Mailing Address 1379 DILWORTH TOWN XING STE 214

City: WEST CHESTER | State: PA | Zip Code: 19382

Purpose of Disbursement: WEBSITE EXPENSE

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 04 / 21 / 2015

Transaction ID : SB29.I488

Amount of Each Disbursement this Period: 164.50

SUBTOTAL of Disbursements This Page (optional) ▶ 1179.00

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

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

A. Full Name (Last, First, Middle Initial)
LIBERTY FOR ALL INC.

Mailing Address P.O. BOX 25394

City: ALEXANDRIA | State: VA | Zip Code: 22313

Purpose of Disbursement: TRANSFER

Candidate Name:

Category/ Type:

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 01 / 15 / 2015

Transaction ID : SB29.I566

Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
LIBERTY POLITICAL SOLUTIONS

Mailing Address 497 HOOKSETT RD STE 127

City: MANCHESTER | State: NH | Zip Code: 03104

Purpose of Disbursement: VIDEO PRODUCTION SERVICES

Candidate Name:

Category/ Type:

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 04 / 30 / 2015

Transaction ID : SB29.I519

Amount of Each Disbursement this Period: 1200.00

C. Full Name (Last, First, Middle Initial)
MANDO MEDIA LTD

Mailing Address 1112 WILLOW SPRINGS DR

City: LOUISVILLE | State: KY | Zip Code: 40242

Purpose of Disbursement: IT SUPPORT

Candidate Name:

Category/ Type:

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 01 / 29 / 2015

Transaction ID : SB29.I483

Amount of Each Disbursement this Period: 202.50

SUBTOTAL of Disbursements This Page (optional) ▶ 2402.50

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 Page

FOR LINE NUMBER: (check only one)

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

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

A.
Full Name (Last, First, Middle Initial)
MANDO MEDIA LTD
Mailing Address 1112 WILLOW SPRINGS DR
City: LOUISVILLE | State: KY | Zip Code: 40242
Purpose of Disbursement: IT SUPPORT
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 06 / 2015
Transaction ID : SB29.I484
Amount of Each Disbursement this Period: 172.23

B.
Full Name (Last, First, Middle Initial)
MANDO MEDIA LTD
Mailing Address 1112 WILLOW SPRINGS DR
City: LOUISVILLE | State: KY | Zip Code: 40242
Purpose of Disbursement: IT SUPPORT
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 04 / 22 / 2015
Transaction ID : SB29.I485
Amount of Each Disbursement this Period: 1428.75

C.
Full Name (Last, First, Middle Initial)
MANDO MEDIA LTD
Mailing Address 1112 WILLOW SPRINGS DR
City: LOUISVILLE | State: KY | Zip Code: 40242
Purpose of Disbursement: IT SUPPORT
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 06 / 29 / 2015
Transaction ID : SB29.I486
Amount of Each Disbursement this Period: 180.00

SUBTOTAL of Disbursements This Page (optional) ▶ 1780.98

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

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

A. Full Name (Last, First, Middle Initial)
MARRIOTT

Mailing Address 10400 FERNWOOD RD

City: BETHESDA | State: MD | Zip Code: 20817

Purpose of Disbursement: TRAVEL

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 04 / 13 / 2015

Transaction ID : SB29.I573

Amount of Each Disbursement this Period: 299.75

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

Mailing Address 2702 LOVE FIELD DR

City: DALLAS | State: TX | Zip Code: 75235

Purpose of Disbursement: TRAVEL

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 04 / 15 / 2015

Transaction ID : SB29.I512

Amount of Each Disbursement this Period: 865.00

C. Full Name (Last, First, Middle Initial)
SPECTRUM MARKETING COMPANIES

Mailing Address 95 EDDY RD #101

City: MANCHESTER | State: NH | Zip Code: 03102

Purpose of Disbursement: DIRECT MAIL

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 03 / 26 / 2015

Transaction ID : SB29.I549

Amount of Each Disbursement this Period: 1318.50

SUBTOTAL of Disbursements This Page (optional) ▶ 2483.25

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

Image# 201510219003217555

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

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

A. Full Name (Last, First, Middle Initial)
SPECTRUM MARKETING COMPANIES

Mailing Address 95 EDDY RD #101

City: MANCHESTER | State: NH | Zip Code: 03102

Purpose of Disbursement: ADVERTISING

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 05 / 07 / 2015

Transaction ID : SB29.I550

Amount of Each Disbursement this Period: 1491.48

B. Full Name (Last, First, Middle Initial)
SPECTRUM MARKETING COMPANIES

Mailing Address 95 EDDY RD #101

City: MANCHESTER | State: NH | Zip Code: 03102

Purpose of Disbursement: ADVERTISING

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 05 / 12 / 2015

Transaction ID : SB29.I551

Amount of Each Disbursement this Period: 1491.48

C. Full Name (Last, First, Middle Initial)
SPECTRUM MARKETING COMPANIES

Mailing Address 95 EDDY RD #101

City: MANCHESTER | State: NH | Zip Code: 03102

Purpose of Disbursement: ADVERTISING

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 05 / 12 / 2015

Transaction ID : SB29.I552

Amount of Each Disbursement this Period: 1491.48

SUBTOTAL of Disbursements This Page (optional) ▶ 4474.44

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

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

A.
Full Name (Last, First, Middle Initial)
SUREPAYROLL
Mailing Address 2350 RAVINE WAY
STE 100
City GLENVIEW State IL Zip Code 60025
Purpose of Disbursement: PAYROLL TAXES
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 01 / 20 / 2015
Transaction ID : SB29.I584
Amount of Each Disbursement this Period: 418.51

B.
Full Name (Last, First, Middle Initial)
SUREPAYROLL
Mailing Address 2350 RAVINE WAY
STE 100
City GLENVIEW State IL Zip Code 60025
Purpose of Disbursement: PAYROLL PROCESSING
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 01 / 20 / 2015
Transaction ID : SB29.I585
Amount of Each Disbursement this Period: 30.80

C.
Full Name (Last, First, Middle Initial)
SUREPAYROLL
Mailing Address 2350 RAVINE WAY
STE 100
City GLENVIEW State IL Zip Code 60025
Purpose of Disbursement: PAYROLL TAXES
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 01 / 30 / 2015
Transaction ID : SB29.I589
Amount of Each Disbursement this Period: 415.49

SUBTOTAL of Disbursements This Page (optional) ▶ 864.80

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

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

A.
Full Name (Last, First, Middle Initial)
SUREPAYROLL
Mailing Address 2350 RAVINE WAY
STE 100
City GLENVIEW
State IL
Zip Code 60025
Purpose of Disbursement: PAYROLL PROCESSING
Candidate Name
Category/ Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 01 / 30 / 2015
Transaction ID : SB29.I590
Amount of Each Disbursement this Period: 30.80

B.
Full Name (Last, First, Middle Initial)
SUREPAYROLL
Mailing Address 2350 RAVINE WAY
STE 100
City GLENVIEW
State IL
Zip Code 60025
Purpose of Disbursement: PAYROLL TAXES
Candidate Name
Category/ Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 02 / 13 / 2015
Transaction ID : SB29.I594
Amount of Each Disbursement this Period: 356.72

C.
Full Name (Last, First, Middle Initial)
SUREPAYROLL
Mailing Address 2350 RAVINE WAY
STE 100
City GLENVIEW
State IL
Zip Code 60025
Purpose of Disbursement: PAYROLL PROCESSING
Candidate Name
Category/ Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 02 / 13 / 2015
Transaction ID : SB29.I595
Amount of Each Disbursement this Period: 30.80

SUBTOTAL of Disbursements This Page (optional) ▶ 418.32

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 23 24 25 26
27 28a 28b 28c X 29 30b

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

A.
Full Name (Last, First, Middle Initial)
SUREPAYROLL
Mailing Address 2350 RAVINE WAY
STE 100
City GLENVIEW State IL Zip Code 60025
Purpose of Disbursement: PAYROLL TAXES
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 02 / 27 / 2015
Transaction ID : SB29.I599
Amount of Each Disbursement this Period: 286.87

B.
Full Name (Last, First, Middle Initial)
SUREPAYROLL
Mailing Address 2350 RAVINE WAY
STE 100
City GLENVIEW State IL Zip Code 60025
Purpose of Disbursement: PAYROLL PROCESSING
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 02 / 27 / 2015
Transaction ID : SB29.I600
Amount of Each Disbursement this Period: 30.80

C.
Full Name (Last, First, Middle Initial)
SUREPAYROLL
Mailing Address 2350 RAVINE WAY
STE 100
City GLENVIEW State IL Zip Code 60025
Purpose of Disbursement: PAYROLL TAXES
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 03 / 16 / 2015
Transaction ID : SB29.I605
Amount of Each Disbursement this Period: 436.69

SUBTOTAL of Disbursements This Page (optional) ▶ 754.36

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

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

A.
Full Name (Last, First, Middle Initial)
SUREPAYROLL
Mailing Address 2350 RAVINE WAY
STE 100
City GLENVIEW State IL Zip Code 60025
Purpose of Disbursement: PAYROLL PROCESSING
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 03 / 16 / 2015
Transaction ID : SB29.I606
Amount of Each Disbursement this Period: 32.38

B.
Full Name (Last, First, Middle Initial)
SUREPAYROLL
Mailing Address 2350 RAVINE WAY
STE 100
City GLENVIEW State IL Zip Code 60025
Purpose of Disbursement: PAYROLL TAXES
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 04 / 01 / 2015
Transaction ID : SB29.I611
Amount of Each Disbursement this Period: 436.67

C.
Full Name (Last, First, Middle Initial)
SUREPAYROLL
Mailing Address 2350 RAVINE WAY
STE 100
City GLENVIEW State IL Zip Code 60025
Purpose of Disbursement: PAYROLL PROCESSING
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 04 / 01 / 2015
Transaction ID : SB29.I612
Amount of Each Disbursement this Period: 32.38

SUBTOTAL of Disbursements This Page (optional) ▶ 501.43

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

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

A.
Full Name (Last, First, Middle Initial)
SUREPAYROLL
Mailing Address 2350 RAVINE WAY
STE 100
City GLENVIEW State IL Zip Code 60025
Purpose of Disbursement: PAYROLL TAXES
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 04 / 13 / 2015
Transaction ID : SB29.I617
Amount of Each Disbursement this Period: 436.68

B.
Full Name (Last, First, Middle Initial)
SUREPAYROLL
Mailing Address 2350 RAVINE WAY
STE 100
City GLENVIEW State IL Zip Code 60025
Purpose of Disbursement: PAYROLL PROCESSING
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 04 / 13 / 2015
Transaction ID : SB29.I618
Amount of Each Disbursement this Period: 32.38

C.
Full Name (Last, First, Middle Initial)
SUREPAYROLL
Mailing Address 2350 RAVINE WAY
STE 100
City GLENVIEW State IL Zip Code 60025
Purpose of Disbursement: PAYROLL TAXES
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 05 / 01 / 2015
Transaction ID : SB29.I623
Amount of Each Disbursement this Period: 436.67

SUBTOTAL of Disbursements This Page (optional) ▶ 905.73

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

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

A.
Full Name (Last, First, Middle Initial)
SUREPAYROLL

Mailing Address 2350 RAVINE WAY
STE 100

City: GLENVIEW | State: IL | Zip Code: 60025

Purpose of Disbursement: PAYROLL PROCESSING

Candidate Name

Category/ Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 05 / 01 / 2015

Transaction ID : SB29.I624

Amount of Each Disbursement this Period: 32.38

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

Mailing Address 2350 RAVINE WAY
STE 100

City: GLENVIEW | State: IL | Zip Code: 60025

Purpose of Disbursement: PAYROLL TAXES

Candidate Name

Category/ Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 05 / 15 / 2015

Transaction ID : SB29.I629

Amount of Each Disbursement this Period: 426.18

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

Mailing Address 2350 RAVINE WAY
STE 100

City: GLENVIEW | State: IL | Zip Code: 60025

Purpose of Disbursement: PAYROLL PROCESSING

Candidate Name

Category/ Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 05 / 15 / 2015

Transaction ID : SB29.I630

Amount of Each Disbursement this Period: 32.38

SUBTOTAL of Disbursements This Page (optional) ▶ 490.94

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

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

A.
Full Name (Last, First, Middle Initial)
SUREPAYROLL
Mailing Address 2350 RAVINE WAY
STE 100
City GLENVIEW State IL Zip Code 60025
Purpose of Disbursement: PAYROLL TAXES
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 06 / 01 / 2015
Transaction ID : SB29.I635
Amount of Each Disbursement this Period: 421.52

B.
Full Name (Last, First, Middle Initial)
SUREPAYROLL
Mailing Address 2350 RAVINE WAY
STE 100
City GLENVIEW State IL Zip Code 60025
Purpose of Disbursement: PAYROLL PROCESSING
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 06 / 01 / 2015
Transaction ID : SB29.I636
Amount of Each Disbursement this Period: 32.38

C.
Full Name (Last, First, Middle Initial)
SUREPAYROLL
Mailing Address 2350 RAVINE WAY
STE 100
City GLENVIEW State IL Zip Code 60025
Purpose of Disbursement: PAYROLL TAXES
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 06 / 16 / 2015
Transaction ID : SB29.I641
Amount of Each Disbursement this Period: 420.76

SUBTOTAL of Disbursements This Page (optional) ▶ 874.66

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

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

A. Full Name (Last, First, Middle Initial)
SUREPAYROLL

Mailing Address 2350 RAVINE WAY
STE 100

City: GLENVIEW | State: IL | Zip Code: 60025

Purpose of Disbursement: PAYROLL PROCESSING

Candidate Name:

Category/ Type:

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 06 / 16 / 2015

Transaction ID : SB29.I642

Amount of Each Disbursement this Period: 32.38

B. Full Name (Last, First, Middle Initial)
TEXAS WORKFORCE COMMISSION

Mailing Address 101 E 15TH ST

City: AUSTIN | State: TX | Zip Code: 78778-0091

Purpose of Disbursement: TAXES

Candidate Name:

Category/ Type:

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 02 / 24 / 2015

Transaction ID : SB29.I553

Amount of Each Disbursement this Period: 394.72

C. Full Name (Last, First, Middle Initial)
US POSTAL SERVICE

Mailing Address 475 L'ENFANT PLZ

City: WASHINGTON | State: DC | Zip Code: 20260

Purpose of Disbursement: POSTAGE

Candidate Name:

Category/ Type:

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 05 / 11 / 2015

Transaction ID : SB29.I546

Amount of Each Disbursement this Period: 637.00

SUBTOTAL of Disbursements This Page (optional) ▶ 1064.10

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

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

A. Full Name (Last, First, Middle Initial)
US POSTAL SERVICE

Mailing Address 475 L'ENFANT PLZ

City: WASHINGTON | State: DC | Zip Code: 20260

Purpose of Disbursement: MAIL PERMIT FEE

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 06 / 29 / 2015

Transaction ID : SB29.I547

Amount of Each Disbursement this Period: 225.00

B. Full Name (Last, First, Middle Initial)
VICI MEDIA GROUP

Mailing Address 816 BIG WOODS RD

City: LONGVIEW | State: TX | Zip Code: 75605

Purpose of Disbursement: WEBSITE DESIGN & CONSUTLING

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 02 / 12 / 2015

Transaction ID : SB29.I541

Amount of Each Disbursement this Period: 75.00

C. Full Name (Last, First, Middle Initial)
VICI MEDIA GROUP

Mailing Address 816 BIG WOODS RD

City: LONGVIEW | State: TX | Zip Code: 75605

Purpose of Disbursement: WEBSITE DESIGN & CONSUTLING

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 03 / 03 / 2015

Transaction ID : SB29.I542

Amount of Each Disbursement this Period: 263.86

SUBTOTAL of Disbursements This Page (optional) ▶ 563.86

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)

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

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

A. Full Name (Last, First, Middle Initial)
VICI MEDIA GROUP

Mailing Address 816 BIG WOODS RD

City: LONGVIEW | State: TX | Zip Code: 75605

Purpose of Disbursement: WEBSITE DESIGN & CONSUTLING

Candidate Name

Category/ Type

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

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

Date of Disbursement: 04 / 22 / 2015

Transaction ID : SB29.I543

Amount of Each Disbursement this Period: 75.00

B. Full Name (Last, First, Middle Initial)
VICI MEDIA GROUP

Mailing Address 816 BIG WOODS RD

City: LONGVIEW | State: TX | Zip Code: 75605

Purpose of Disbursement: WEBSITE DESIGN & CONSUTLING

Candidate Name

Category/ Type

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

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

Date of Disbursement: 06 / 15 / 2015

Transaction ID : SB29.I544

Amount of Each Disbursement this Period: 350.00

C. Full Name (Last, First, Middle Initial)
WELLS FARGO

Mailing Address 420 MONTGOMERY ST

City: SAN FRANCISCO | State: CA | Zip Code: 94104

Purpose of Disbursement: BANK FEES

Candidate Name

Category/ Type

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

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

Date of Disbursement: 01 / 12 / 2015

Transaction ID : SB29.I475

Amount of Each Disbursement this Period: 76.98

SUBTOTAL of Disbursements This Page (optional) ▶ 501.98

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

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

A.
Full Name (Last, First, Middle Initial)
WELLS FARGO
Mailing Address 420 MONTGOMERY ST
City: SAN FRANCISCO State: CA Zip Code: 94104
Purpose of Disbursement: BANK FEE
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 01 / 21 / 2015
Transaction ID : SB29.I476
Amount of Each Disbursement this Period: 35.00

B.
Full Name (Last, First, Middle Initial)
WELLS FARGO
Mailing Address 420 MONTGOMERY ST
City: SAN FRANCISCO State: CA Zip Code: 94104
Purpose of Disbursement: BANK FEE
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 02 / 11 / 2015
Transaction ID : SB29.I477
Amount of Each Disbursement this Period: 80.81

C.
Full Name (Last, First, Middle Initial)
WELLS FARGO
Mailing Address 420 MONTGOMERY ST
City: SAN FRANCISCO State: CA Zip Code: 94104
Purpose of Disbursement: BANK FEE
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 03 / 11 / 2015
Transaction ID : SB29.I478
Amount of Each Disbursement this Period: 81.80

SUBTOTAL of Disbursements This Page (optional) ▶ 197.61

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

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

A.
Full Name (Last, First, Middle Initial)
WELLS FARGO
Mailing Address 420 MONTGOMERY ST
City: SAN FRANCISCO State: CA Zip Code: 94104
Purpose of Disbursement: BANK FEE
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 04 / 13 / 2015
Transaction ID : SB29.I479
Amount of Each Disbursement this Period: 82.09

B.
Full Name (Last, First, Middle Initial)
WELLS FARGO
Mailing Address 420 MONTGOMERY ST
City: SAN FRANCISCO State: CA Zip Code: 94104
Purpose of Disbursement: BANK FEE
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 05 / 11 / 2015
Transaction ID : SB29.I480
Amount of Each Disbursement this Period: 84.69

C.
Full Name (Last, First, Middle Initial)
WELLS FARGO
Mailing Address 420 MONTGOMERY ST
City: SAN FRANCISCO State: CA Zip Code: 94104
Purpose of Disbursement: BANK FEE
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Date of Disbursement: 06 / 11 / 2015
Transaction ID : SB29.I481
Amount of Each Disbursement this Period: 120.90

SUBTOTAL of Disbursements This Page (optional) ▶ 287.68

TOTAL This Period (last page this line number only) ▶ 182549.25

Image# 201510219003217568

SCHEDULE C (FEC Form 3X)
LOANS

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

FOR LINE 13 OF FORM 3X

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

Transaction ID : SC.001

LOAN SOURCE Full Name (Last, First, Middle Initial)
JOHN RAMSEY
45K Repaid SB26; 38K New Loans SA13

Mailing Address PO BOX 26141

City ALEXANDRIA State VA ZIP Code 22313

Election:
- [ ] Primary
- [ ] General
- [ ] Other (specify) ▼

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
83200.00	7000.00	76200.00

TERMS

Date Incurred (MM/DD/YYYY)	Date Due (MM/DD/YYYY)	Interest Rate	Secured:
07/22/2013	12/31/2014	0.00 % (apr)	[ ] Yes [X] No

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

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

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

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

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

SUBTOTALS This Period This Page (optional) ▶	76200.00
TOTALS This Period (last page in this line only) ▶	76200.00

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