

**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

NextGen Committee

ADDRESS (number and street) ▼

555 Capitol Mall, Suite 1425

☐ Check if different than previously reported. (ACC)

Sacramento

CA

95814

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00542779

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

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

Election on

06

25

2013

in the State of

MA

(d) 30-Day

POST-Election

Report for the:

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

Election on

in the State of

5. Covering Period

04

11

2013

through

06

05

2013

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 Thomas Adams

Signature of Treasurer

Thomas Adams

[Electronically Filed]

Date

06

13

2013

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

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

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NextGen Committee

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 04 / 11 / 2013

To:

 M M / D D / Y Y Y Y Y
 06 / 05 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2013		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	212220.00	
(c) Total Receipts (from Line 19)	1114850.00	1864850.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1327070.00	1864850.00
7. Total Disbursements (from Line 31)	679026.63	1216806.63
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	648043.37	648043.37
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)	127218.00	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

NextGen Committee

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
04	/	11	/	2013

To:

M M	/	D D	/	Y Y Y Y Y Y
06	/	05	/	2013

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).....

1020250.00

1770250.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

1020250.00

1770250.00

(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) ►

1020250.00

1770250.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

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

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

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

94600.00

94600.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) ►

1114850.00

1864850.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

1114850.00

1864850.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	121450.12	233650.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	121450.12	233650.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	250000.00
24. Independent Expenditures (use Schedule E)	528576.51	674156.51
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	29000.00	59000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	679026.63	1216806.63
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	679026.63	1216806.63

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1020250.00	1770250.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1020250.00	1770250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	121450.12	233650.12
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	121450.12	233650.12

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 38
(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)

NextGen Committee

Full Name (Last, First, Middle Initial)

A. NextGen Action

Mailing Address 351 California Street, Suite 1200

City State Zip Code
San Francisco CA 94104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2013

Transaction ID : INCA108

Amount of Each Receipt this Period

12500.00

Full Name (Last, First, Middle Initial)

B. NextGen Action

Mailing Address 351 California Street, Suite 1200

City State Zip Code
San Francisco CA 94104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2013

Transaction ID : INCA109

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

C. NextGen Action

Mailing Address 351 California Street, Suite 1200

City State Zip Code
San Francisco CA 94104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2013

Transaction ID : INCA110

Amount of Each Receipt this Period

6250.00

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

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

20250.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : INCA108

In-kind contribution: Consulting Services

Form/Schedule: SA11AI

Transaction ID: INCA109

In-kind contribution: Consulting Services

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SA11AI

Transaction ID : INCA110

In-kind contribution: Consulting Services

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 9 OF 38
(check only one)

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

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NAME OF COMMITTEE (In Full)

NextGen Committee

Full Name (Last, First, Middle Initial)

A. Thomas F. Steyer

Mailing Address One Maritime Plaza, Suite 2100

City State Zip Code
 San Francisco CA 94111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Next Generation

Co-founding Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 23 2013

Transaction ID : INCA66

Amount of Each Receipt this Period

1000000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

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

1000000.00

1020250.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

NextGen Committee

Full Name (Last, First, Middle Initial)

A. Sadler Strategic Media, Inc.

Mailing Address 12103 Viewcrest Road

City State Zip Code
 Studio City CA 91604

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

39600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 20 / 2013

Transaction ID : INCA57

Amount of Each Receipt this Period

39600.00

Refund

Full Name (Last, First, Middle Initial)

B. Winning Connections, Inc.

Mailing Address 317 Pennsylvania Ave., SE,
2nd Floor

City State Zip Code
 Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 03 / 2013

Transaction ID : INCA49

Amount of Each Receipt this Period

55000.00

Refund

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

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

94600.00

94600.00

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

PAGE 11 OF 38

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

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NAME OF COMMITTEE (In Full)

NextGen Committee

Full Name (Last, First, Middle Initial)

A. Barnes Mosher Whitehurst Lauter & Partners, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2013

Mailing Address 660 Mission St., 2nd Floor,
Ste 200

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Consulting Services

001

Candidate Name

Category/
Type**Transaction ID : EXPB60**

Amount of Each Disbursement this Period

3125.00

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Barnes Mosher Whitehurst Lauter & Partners, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2013

Mailing Address 660 Mission St., 2nd Floor,
Ste 200

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Consulting Services

001

Candidate Name

Category/
Type**Transaction ID : EXPB61**

Amount of Each Disbursement this Period

3125.00

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Benenson Strategy Group

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2013

Mailing Address 720 South Colorado Blvd.,
Suite 500N

City Denver State CO Zip Code 80246

Purpose of Disbursement
Polling

005

Candidate Name

Category/
Type**Transaction ID : EXPB39**

Amount of Each Disbursement this Period

27150.00

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

33400.00

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

PAGE 12 OF 38

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

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NAME OF COMMITTEE (In Full)

NextGen Committee

Full Name (Last, First, Middle Initial)

A. Benenson Strategy GroupMailing Address 720 South Colorado Blvd.,
Suite 500NCity State Zip Code
Denver CO 80246Purpose of Disbursement
Travel & Expenses

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y
05 / 21 / 2013**Transaction ID : EXPB65**

Amount of Each Disbursement this Period

9092.29

Full Name (Last, First, Middle Initial)

B. Benenson Strategy GroupMailing Address 720 South Colorado Blvd.,
Suite 500NCity State Zip Code
Denver CO 80246Purpose of Disbursement
Focus Group Management

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y
05 / 21 / 2013**Transaction ID : EXPB64**

Amount of Each Disbursement this Period

31615.00

Full Name (Last, First, Middle Initial)

C. Campaign Industries, LLC

Mailing Address 1501 Dempster Street

City State Zip Code
Evanston IL 60201Purpose of Disbursement
Poster Production for Press Event Prop

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y
05 / 24 / 2013**Transaction ID : EXPB124**

Amount of Each Disbursement this Period

45.15

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

40752.44

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

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

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NAME OF COMMITTEE (In Full)

NextGen Committee

Full Name (Last, First, Middle Initial)

A. Campaign Industries, LLC

Mailing Address 1501 Dempster Street

City Evanston State IL Zip Code 60201

Purpose of Disbursement
Consulting Services

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 24 2013**Transaction ID : EXPB69**

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

B. Campaign Industries, LLC

Mailing Address 1501 Dempster Street

City Evanston State IL Zip Code 60201

Purpose of Disbursement
Travel Expenses

002

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 24 2013**Transaction ID : EXPB123**

Amount of Each Disbursement this Period

141.20

Full Name (Last, First, Middle Initial)

C. Campaign Industries, LLC

Mailing Address 1501 Dempster Street

City Evanston State IL Zip Code 60201

Purpose of Disbursement
Shipping

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 24 2013**Transaction ID : EXPB125**

Amount of Each Disbursement this Period

194.46

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

15335.66

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

PAGE 14 OF 38

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

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NAME OF COMMITTEE (In Full)

NextGen Committee

Full Name (Last, First, Middle Initial)

A. DGA Productions

Mailing Address 50 Hunt Street

City

Watertown

State

MA

Zip Code

02472

Purpose of Disbursement

Camera Rental for Press Conference

007

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 16 2013**Transaction ID : EXPB43**

Amount of Each Disbursement this Period

1351.13

Full Name (Last, First, Middle Initial)

B. HSC, Inc.

Mailing Address 360 Grand Avenue, Suite 138

City

Oakland

State

CA

Zip Code

94610

Purpose of Disbursement

Campaign Research & Expenses

005

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 21 2013**Transaction ID : EXPB58**

Amount of Each Disbursement this Period

23003.01

Full Name (Last, First, Middle Initial)

C. Jane Kleeb

Mailing Address 1010 North Denver Avenue

City

Hastings

State

NE

Zip Code

68901

Purpose of Disbursement

Travel Reimbursement

002

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 21 2013**Transaction ID : EXPB59**

Amount of Each Disbursement this Period

3223.50

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

27577.64

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

PAGE 15 OF 38

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

NextGen Committee

Full Name (Last, First, Middle Initial)

A. Olson Hagel & Fishburn, LLP

Mailing Address 555 Capitol Mall, Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
Legal & Reporting Services

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 15 2013

Transaction ID : EXPB32

Amount of Each Disbursement this Period

12865.92

Full Name (Last, First, Middle Initial)

B. Olson Hagel & Fishburn, LLP

Mailing Address 555 Capitol Mall, Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
Legal & Reporting Services

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 15 2013

Transaction ID : EXPB50

Amount of Each Disbursement this Period

7970.63

Full Name (Last, First, Middle Initial)

C. Sadler Strategic Media, Inc.

Mailing Address 12103 Viewcrest Road

City Studio City State CA Zip Code 91604

Purpose of Disbursement
Offset for independent expenditure paid in prior period; disseminated in
current period

24A

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 15 2013

Transaction ID : EXPB21

Amount of Each Disbursement this Period

-49700.00

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

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

-28863.45

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

NextGen Committee

A. Sadler Strategic Media, Inc.

Mailing Address 12103 Viewcrest Road

City	State	Zip Code
Studio City	CA	91604

Purpose of Disbursement	Aerial Banner

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : EXPB81

Amount of Each Disbursement this Period

22000.00

Full Name (Last, First, Middle Initial)

B. Tigercomm

Mailing Address 1901 N. Fort Myer Drive, Suite 850

City	State	Zip Code
Arlington	VA	22209

Purpose of Disbursement Consulting Services

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : EXPB62

Amount of Each Disbursement this Period

32000.00

Full Name (Last, First, Middle Initial)

C. Tigercomm

Mailing Address 1901 N. Fort Myer Drive, Suite 850

City	State	Zip Code
Arlington	VA	22209

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : EXPB63

Amount of Each Disbursement this Period

2247.83

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

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

56247.83

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

PAGE 17 OF 38

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

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NAME OF COMMITTEE (In Full)

NextGen Committee

Full Name (Last, First, Middle Initial)

A. Tigercomm

Mailing Address 1901 N. Fort Myer Drive, Suite 850

City	State	Zip Code
Arlington	VA	22209

Purpose of Disbursement
Consulting Services

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2013

Transaction ID : EXPB71

Amount of Each Disbursement this Period

32000.00

Full Name (Last, First, Middle Initial)

B. Winning Connections, Inc.Mailing Address 317 Pennsylvania Ave., SE,
2nd Floor

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Offset for independent expenditure paid in prior period; disseminated in current period

24A

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2013

Transaction ID : EXPB25

Amount of Each Disbursement this Period

-55000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

-23000.00

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

121450.12

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

PAGE 18 OF 38

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

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NAME OF COMMITTEE (In Full)

NextGen Committee

Full Name (Last, First, Middle Initial)

A. American Values NetworkMailing Address 1901 North Ft. Myer Drive,
Suite 900

City Arlington State VA Zip Code 22209

Purpose of Disbursement
Civic Donation

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2013

Transaction ID : EXPB70

Amount of Each Disbursement this Period

29000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

29000.00

29000.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 19 OF 38

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

NextGen Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Adams , Thomas

Nature of Debt (Purpose):

Consulting for Blog Piece (estimate)

Mailing Address 176 Valdeflores Drive

City State

Zip Code

Burlingame

CA

94010

Outstanding Balance Beginning This Period

250.00

Transaction ID : PAYD12

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Adams , Thomas

Nature of Debt (Purpose):

Consulting Services

Mailing Address 176 Valdeflores Drive

City State

Zip Code

Burlingame

CA

94010

Outstanding Balance Beginning This Period

7500.00

Transaction ID : PAYD17

Amount Incurred This Period

0.00

Payment This Period

7500.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Barnes Mosher Whitehurst Lauter & Partners, Inc.

Nature of Debt (Purpose):

Consulting for Blog Piece (estimate)

Mailing Address 660 Mission St., 2nd Floor,
Ste 200

City

State

Zip Code

San Francisco

CA

94105

Outstanding Balance Beginning This Period

148.00

Transaction ID : PAYD11

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

148.00

1) SUBTOTALS This Period This Page (optional)..... ►

398.00

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

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 20 OF 38

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

NextGen Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Barnes Mosher Whitehurst Lauter & Partners, Inc.

Nature of Debt (Purpose):
Consulting ServicesMailing Address 660 Mission St., 2nd Floor,
Ste 200

City	State	Zip Code
San Francisco	CA	94105

Outstanding Balance Beginning This Period

6250.00

Transaction ID : PAYD33

Amount Incurred This Period

0.00

Payment This Period

6250.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Benenson Strategy Group

Nature of Debt (Purpose):
PollingMailing Address 720 South Colorado Blvd.,
Suite 500N

City	State	Zip Code
Denver	CO	80246

Outstanding Balance Beginning This Period

27150.00

Transaction ID : PAYD31

Amount Incurred This Period

0.00

Payment This Period

27150.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

DGA Productions

Nature of Debt (Purpose):
Camera Rental for Press Conference

Mailing Address 50 Hunt Street

City	State	Zip Code
Watertown	MA	02472

Outstanding Balance Beginning This Period

1351.13

Transaction ID : PAYD34

Amount Incurred This Period

0.00

Payment This Period

1351.13

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

0.00

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

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 21 OF 38

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

NextGen Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HSC, Inc.

Nature of Debt (Purpose):

Campaign Research (estimate)

Mailing Address 360 Grand Avenue, Suite 138

City State

Zip Code

Oakland

CA

94610

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD116

Amount Incurred This Period

20000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mark Fabiani, LLC

Nature of Debt (Purpose):

Consulting for Blog Piece

Mailing Address 939 Coast Blvd., Suite 4D

City State

Zip Code

La Jolla

CA

92037

Outstanding Balance Beginning This Period

75.00

Transaction ID : PAYD13

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

75.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mark Fabiani, LLC

Nature of Debt (Purpose):

Consulting Services

Mailing Address 939 Coast Blvd., Suite 4D

City

State

Zip Code

La Jolla

CA

92037

Outstanding Balance Beginning This Period

12500.00

Transaction ID : PAYD46

Amount Incurred This Period

0.00

Payment This Period

12500.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

20075.00

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

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 22 OF 38

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

NextGen Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Markham Group, LLC

Nature of Debt (Purpose):
Consulting Services

Mailing Address 1000 West 3rd Street

City State

Zip Code

Little Rock

AR

72201

Outstanding Balance Beginning This Period

38100.00

Transaction ID : PAYD15

Amount Incurred This Period

0.00

Payment This Period

38100.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Markham Group, LLC

Nature of Debt (Purpose):

Lawn sign creation & distribution

Mailing Address 1000 West 3rd Street

City State

Zip Code

Little Rock

AR

72201

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD113

Amount Incurred This Period

60000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

60000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Social Stream Media

Nature of Debt (Purpose):

Banner ads and website production

Mailing Address 268 Bush Street, #3335

City

State

Zip Code

San Francisco

CA

94104

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD114

Amount Incurred This Period

20500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20500.00

1) SUBTOTALS This Period This Page (optional)..... ►

80500.00

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

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 23 OF 38

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

NextGen Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Tigercomm

Nature of Debt (Purpose):
Consulting for Blog Piece

Mailing Address 1901 N. Fort Myer Drive, Suite 850

City State

Arlington

Zip Code

VA

22209

Outstanding Balance Beginning This Period

4400.00

Transaction ID : PAYD7

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4400.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Tigercomm

Nature of Debt (Purpose):
Consulting for Video Mobile Billboards

Mailing Address 1901 N. Fort Myer Drive, Suite 850

City State

Arlington

Zip Code

VA

22209

Outstanding Balance Beginning This Period

335.00

Transaction ID : PAYD8

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

335.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Tigercomm

Nature of Debt (Purpose):
Consulting for Blog Piece

Mailing Address 1901 N. Fort Myer Drive, Suite 850

City

Arlington

State

VA

Zip Code

22209

Outstanding Balance Beginning This Period

110.00

Transaction ID : PAYD9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

110.00

1) SUBTOTALS This Period This Page (optional)..... ►

4845.00

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

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 24 OF 38

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

NextGen Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Tigercomm

Nature of Debt (Purpose):

Consulting & design for GOTV flyer

Mailing Address 1901 N. Fort Myer Drive, Suite 850

City State

Zip Code

Arlington

VA

22209

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD107

Amount Incurred This Period

21400.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

21400.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

21400.00

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

127218.00

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

127218.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 25 OF 38
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee	FEC IDENTIFICATION NUMBER ▼ C C00542779
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Adams , Thomas		Date M M / D D / Y Y Y Y Y Y 04 / 16 / 2013
Mailing Address 176 Valdeflores Drive		Amount 7500.00
City Burlingame	State CA	
Purpose of Expenditure Consulting Services	Category/ Type 24A	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 351449.51		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013

Full Name (Last, First, Middle Initial) of Payee Adams , Thomas		Date M M / D D / Y Y Y Y Y Y 04 / 21 / 2013
Mailing Address 176 Valdeflores Drive		Amount 7500.00
City Burlingame	State CA	
Purpose of Expenditure Consulting Services	Category/ Type 24A	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 351449.51		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013

(a) SUBTOTAL of Itemized Independent Expenditures.....	15000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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

Thomas Adams

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
06 / 13 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 26 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00542779 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Adams , Thomas		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 06 / 01 / 2013 </div>
Mailing Address 176 Valdeflores Drive		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1500.00</div>
City Burlingame	State CA	
Purpose of Expenditure Consulting	Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">24A</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Gabriel Gomez		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">330225.00</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) 2013 Runoff

Transaction ID : EDTEALC23

Full Name (Last, First, Middle Initial) of Payee Barnes Mosher Whitehurst Lauter & Partners, Inc.		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 04 / 16 / 2013 </div>
Mailing Address 660 Mission St., 2nd Floor, Ste 200		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">6250.00</div>
City San Francisco	State CA	
Purpose of Expenditure Consulting	Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">24A</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">351449.51</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013

Transaction ID : PDTE18

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;">7750.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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

Thomas Adams

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y
 06 / 13 / 2013

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
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Form/Schedule: SE
Transaction ID : EDTEALC23

Payment for expenditure is an in-kind contribution from NextGen Action

Form/Schedule:
Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00542779 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Barnes Mosher Whitehurst Lauter & Partners, Inc.		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 06 / 01 / 2013 </div>
Mailing Address 660 Mission St., 2nd Floor, Ste 200		Amount <div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y Y Y 6250.00 </div>
City State Zip Code San Francisco CA 94105		
Purpose of Expenditure Consulting	Category/ Type 24A	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Gabriel Gomez		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought Y Y Y Y Y Y Y Y 330225.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) ▶ 2013 Runoff

Full Name (Last, First, Middle Initial) of Payee Campaign Industries, LLC		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 06 / 04 / 2013 </div>
Mailing Address 1501 Dempster Street		Amount <div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y Y Y 80867.50 </div>
City State Zip Code Evanston IL 60201		
Purpose of Expenditure Field program for GOTV	Category/ Type 24E	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Edward Markey		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought Y Y Y Y Y Y Y Y 330225.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) ▶ 2013 Runoff

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y Y Y 87117.50 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y Y Y </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y Y Y </div>

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

Thomas Adams

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 06 / 13 / 2013

Signature

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
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Form/Schedule: SE
Transaction ID : EDTEALC24

Payment for expenditure is an in-kind contribution from NextGen Action

Form/Schedule:
Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 30 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00542779 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee HSC, Inc.		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 360 Grand Avenue, Suite 138		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> 11501.51 </div>
City Oakland	State CA	Zip Code 94610
Purpose of Expenditure Campaign Research & Expenses	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> 351449.51 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) ▶ Special 2013

Transaction ID : EDTEALC31

Full Name (Last, First, Middle Initial) of Payee Mark Fabiani, LLC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 939 Coast Blvd., Suite 4D		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> 12500.00 </div>
City La Jolla	State CA	Zip Code 92037
Purpose of Expenditure Consulting	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> 351449.51 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) ▶ Special 2013

Transaction ID : EDTEALC22

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; width: 100%;">24001.51</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; width: 100%; height: 20px;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; width: 100%; height: 20px;"></div>

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

Thomas Adams

Signature

[Electronically Filed]

Date

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

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 31 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00542779 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Mark Fabiani, LLC		Date M M M / D D D / Y Y Y Y Y Y 05 / 20 / 2013	
Mailing Address 939 Coast Blvd., Suite 4D		Amount 12500.00	
City La Jolla	State CA	Zip Code 92037	Transaction ID : PDTE12 Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: _____ Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Purpose of Expenditure Consulting Services			
Category/Type 24A			
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch			
Calendar Year-To-Date Per Election for Office Sought 351449.51		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	

Full Name (Last, First, Middle Initial) of Payee Mark Fabiani, LLC		Date M M M / D D D / Y Y Y Y Y Y 06 / 01 / 2013	
Mailing Address 939 Coast Blvd., Suite 4D		Amount 12500.00	
City La Jolla	State CA	Zip Code 92037	Transaction ID : EDTEALC25 Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: _____ Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Purpose of Expenditure Consulting			
Category/Type 24A			
Name of Federal Candidate Supported or Opposed by Expenditure: Gabriel Gomez			
Calendar Year-To-Date Per Election for Office Sought 330225.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) 2013 Runoff	

(a) SUBTOTAL of Itemized Independent Expenditures.....	25000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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

Thomas Adams

[Electronically Filed]

Signature

Date

M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2013

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Form/Schedule: SE
Transaction ID : EDTEALC25

Payment for expenditure is an in-kind contribution from NextGen Action

Form/Schedule:
Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00542779 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Markham Group, LLC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 1000 West 3rd Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 38100.00 </div>
City Little Rock	State AR	
Purpose of Expenditure Consulting Services	Category/ Type <div style="border: 1px solid black; padding: 2px;">24A</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 351449.51 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) <u>Special 2013</u>

Transaction ID : PDTE7

Full Name (Last, First, Middle Initial) of Payee Markham Group, LLC [MEMO ITEM]		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 1000 West 3rd Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 30000.00 </div>
City Little Rock	State AR	
Purpose of Expenditure Lawn sign creation & distribution	Category/ Type <div style="border: 1px solid black; padding: 2px;">24A</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Gabriel Gomez		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 330225.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) <u>2013 Runoff</u>

Transaction ID : PDTE22

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 38100.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 00000.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 38100.00 </div>

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

Thomas Adams

[Electronically Filed]

Date

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

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 34 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00542779 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY	

Full Name (Last, First, Middle Initial) of Payee Portal A Limited		Date MM / DD / YYYY 05 / 28 / 2013	
Mailing Address 520 Waller Street		Amount 33000.00	
City San Francisco	State CA	Zip Code 94117	Transaction ID : EDTEALC9
Purpose of Expenditure Video Production		Category/ Type 24A	
Name of Federal Candidate Supported or Opposed by Expenditure: Gabriel Gomez		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: _____ Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 330225.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) ▶ 2013 Runoff	

Full Name (Last, First, Middle Initial) of Payee Portal A Limited		Date MM / DD / YYYY 06 / 01 / 2013	
Mailing Address 520 Waller Street		Amount 10000.00	
City San Francisco	State CA	Zip Code 94117	Transaction ID : PDTE16
Purpose of Expenditure YouTube Video		Category/ Type 24A	
Name of Federal Candidate Supported or Opposed by Expenditure: Gabriel Gomez		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: _____ Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 330225.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) ▶ 2013 Runoff	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	43000.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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

Thomas Adams

[Electronically Filed]

Date

MM / DD / YYYY
 06 / 13 / 2013

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 35 OF 38
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee		FEC IDENTIFICATION NUMBER ▼ C C00542779
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee Printing Unlimited		Date MM / DD / YYYY 06 / 04 / 2013
Mailing Address 63 Plymouth Street		Amount 5907.50
City Holbrook	State MA	Zip Code 02343
Purpose of Expenditure GOTV flyers	Category/ Type 24E	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Edward Markey		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 330225.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) 2013 Runoff

Transaction ID : EDTEALC21

Full Name (Last, First, Middle Initial) of Payee Sadler Strategic Media, Inc.		Date MM / DD / YYYY 04 / 15 / 2013
Mailing Address 12103 Viewcrest Road		Amount 49700.00
City Studio City	State CA	Zip Code 91604
Purpose of Expenditure Aerial Banners	Category/ Type 24A	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 351449.51		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013

Transaction ID : EDTEALC6

(a) SUBTOTAL of Itemized Independent Expenditures.....	55607.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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

Thomas Adams

Signature

[Electronically Filed]

Date

MM / DD / YYYY
06 / 13 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 36 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00542779 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Sadler Strategic Media, Inc.		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 12103 Viewcrest Road		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 153000.00 </div>
City State Zip Code Studio City CA 91604	Transaction ID : EDTEALC10	
Purpose of Expenditure Pandora Ads	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Gabriel Gomez		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 330225.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) ▶ 2013 Runoff

Full Name (Last, First, Middle Initial) of Payee Social Stream Media		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 268 Bush Street, #3335		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 25000.00 </div>
City State Zip Code San Francisco CA 94104	Transaction ID : PDTE15	
Purpose of Expenditure Facebook Ads	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Gabriel Gomez		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 330225.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) ▶ 2013 Runoff

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">178000.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

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Thomas Adams

[Electronically Filed]

Signature

Date

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

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 37 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00542779 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Social Stream Media [MEMO ITEM]		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 06 / 05 / 2013 </div>	
Mailing Address 268 Bush Street, #3335		Amount <div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y 20500.00 </div>	
City San Francisco	State CA		
Purpose of Expenditure Banner ads & website production	Category/ Type <div style="border: 1px solid black; padding: 2px;">24A</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: Gabriel Gomez		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y 330225.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) ▶ 2013 Runoff	

Transaction ID : PDTE21

Full Name (Last, First, Middle Initial) of Payee Tigercomm [MEMO ITEM]		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 06 / 04 / 2013 </div>	
Mailing Address 1901 N. Fort Myer Drive, Suite 850		Amount <div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y 2200.00 </div>	
City Arlington	State VA		
Purpose of Expenditure Consulting & design for GOTV flyer (estimate)	Category/ Type <div style="border: 1px solid black; padding: 2px;">24E</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: Edward Markey		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y 330225.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) ▶ 2013 Runoff	

Transaction ID : PDTE19

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y 0.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y </div>

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

Thomas Adams

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y
 06 / 13 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 38 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00542779 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Winning Connections, Inc.		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 317 Pennsylvania Ave., SE, 2nd Floor		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 55000.00 </div>
City Washington State DC Zip Code 20003		
Purpose of Expenditure Robocalls	Category/Type 24A	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 351449.51		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013

Full Name (Last, First, Middle Initial) of Payee		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
City State Zip Code		
Purpose of Expenditure	Category/Type 	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 55000.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 528576.51 </div>

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

Thomas Adams

[Electronically Filed]

Signature

Date

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