

# 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.   
DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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 Keith A. Davis

Signature of Treasurer Keith A. Davis [Electronically Filed] Date  /  /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)**

Report Covering the Period: From:  /  /  To:  /  /

|  | COLUMN A<br>This Period              | COLUMN B<br>Calendar Year-to-Date     |
|--|--------------------------------------|---------------------------------------|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2014"/>  | <input type="text" value="4946.45"/> | <input type="text" value="4946.45"/>  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="136.24"/>  |                                       |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="7500.00"/> | <input type="text" value="23900.00"/> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="7636.24"/> | <input type="text" value="28846.45"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="7594.48"/> | <input type="text" value="28804.69"/> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="41.76"/>   | <input type="text" value="41.76"/>    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="0.00"/>    |                                       |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <input type="text" value="0.00"/>    |                                       |

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)**

Report Covering the Period: From:  /  /  To:  /  /

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 2500.00                       | 2500.00                           |
| (ii) Unitemized .....   | 0.00                          | 0.00                              |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶  | 2500.00                       | 2500.00                           |
| (b) Political Party Committees .....  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....  | 5000.00                       | 10000.00                          |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 7500.00                       | 12500.00                          |
| 12. Transfers From Affiliated/Other Party Committees.....   | 0.00                          | 11400.00                          |
| 13. All Loans Received .....  | 0.00                          | 0.00                              |
| 14. Loan Repayments Received.....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....   | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds  |                               |                                   |
| (a) Non-Federal Account (from Schedule H3).....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....  | 0.00                          | 0.00                              |
| (c) Total Transfers (add 18(a) and 18(b))..   | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶                        | 7500.00                       | 23900.00                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶                                  | 7500.00                       | 23900.00                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>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 .....   | 2594.48                       | 21064.69                          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 2594.48                       | 21064.69                          |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 5000.00                       | 7500.00                           |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....                   | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements .....  | 0.00                          | 240.00                            |
| 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)) ..      | 7594.48                       | 28804.69                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 7594.48                       | 28804.69                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 7500.00                       | 12500.00                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 7500.00                       | 12500.00                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 2594.48                       | 21064.69                          |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 2594.48                       | 21064.69                          |

**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 6 OF 9   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

|                             |                             |                             |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 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)  
**DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)**

|   |                   |   |
|---|-------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Eric Wnuck</b>   |                   | Date of Receipt<br>MM / DD / YYYY<br>07 / 28 / 2014 |
| Mailing Address 4649 E. Acoma Drive   |                   | <b>Transaction ID : SA11AI.4723</b>                 |
| City<br>Phoenix   | State<br>AZ       |   |
| Zip Code<br>85032   |                   | Amount of Each Receipt this Period<br>2500.00       |
| FEC ID number of contributing federal political committee.<br>C   |                   | Aggregate Year-to-Date ▼<br>2500.00                 |
| Name of Employer<br>Enhanced Medical Imaging  | Occupation<br>CEO |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |   |

|   |            |                                    |
|---|------------|------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B.</b>  |            | Date of Receipt<br>MM / DD / YYYY  |
| Mailing Address   |            | Amount of Each Receipt this Period |
| City  | State      |                                    |
| Zip Code  |            | Aggregate Year-to-Date ▼           |
| FEC ID number of contributing federal political committee.<br>C   |            |                                    |
| Name of Employer  | Occupation |                                    |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |            |                                    |

|   |            |                                    |
|---|------------|------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C.</b>  |            | Date of Receipt<br>MM / DD / YYYY  |
| Mailing Address   |            | Amount of Each Receipt this Period |
| City  | State      |                                    |
| Zip Code  |            | Aggregate Year-to-Date ▼           |
| FEC ID number of contributing federal political committee.<br>C   |            |                                    |
| Name of Employer  | Occupation |                                    |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |            |                                    |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 2500.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 2500.00 |

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

|   |                              |   |   |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one)       | PAGE 7 OF 9   |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
**DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)**

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)</b>                   |   | Date of Receipt   |
| Mailing Address 600 14TH STREET, NW<br>SUITE 800  |   | <input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2014"/> |
| City  | State   | Zip Code  |
| WASHINGTON  | DC  | 20005   |
| FEC ID number of contributing federal political committee.  | <input type="text" value="C"/> <input type="text" value="C00236489"/> | <b>Transaction ID : SA11C.4728</b>  |
| Name of Employer  | Occupation  | Amount of Each Receipt this Period  |
|   |   | <input type="text" value="5000.00"/>  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼  |   |
|   | <input type="text" value="5000.00"/>                                  |   |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b>  |   | Date of Receipt  |
| Mailing Address   |   | <input type="text"/> / <input type="text"/> / <input type="text"/> |
| City  | State   | Zip Code   |
|   |   |  |
| FEC ID number of contributing federal political committee.  | <input type="text" value="C"/> <input type="text"/> | Amount of Each Receipt this Period                                 |
|   |   | <input type="text"/>   |
| Name of Employer  | Occupation  |  |
|   |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼                            |  |
|   | <input type="text"/>                                |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b>  |   | Date of Receipt  |
| Mailing Address   |   | <input type="text"/> / <input type="text"/> / <input type="text"/> |
| City  | State   | Zip Code   |
|   |   |  |
| FEC ID number of contributing federal political committee.  | <input type="text" value="C"/> <input type="text"/> | Amount of Each Receipt this Period                                 |
|   |   | <input type="text"/>   |
| Name of Employer  | Occupation  |  |
|   |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼                            |  |
|   | <input type="text"/>                                |  |

|  |                                      |
|--|--------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <input type="text" value="5000.00"/> |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | <input type="text" value="5000.00"/> |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)**

Full Name (Last, First, Middle Initial)

**A. Intrepid Global Strategies**

Mailing Address 3421 East Avalon Drive

City Phoenix State AZ Zip Code 85018

Purpose of Disbursement  
PAC political strategy consulting fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2014

**Transaction ID : SB21B.4724**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Oliver Schwab**

Mailing Address 11 Spindrift Way

City Annapolis State MD Zip Code 21403

Purpose of Disbursement  
PAC travel/meals (no vendor requiring itemization)

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 24 / 2014

**Transaction ID : SB21B.4721**

Amount of Each Disbursement this Period

34.63

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

2534.63

2534.63



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)**

Full Name (Last, First, Middle Initial)

**A. ANDY TOBIN FOR CONGRESS**

Mailing Address 2532 NORTH 4TH STREET #528

City State Zip Code  
FLAGSTAFF AZ 86004

Purpose of Disbursement  
contribution

Candidate Name  
**ANDY TOBIN HON.**

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

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    | / | 23    | / | 2014      |

**Transaction ID : SB23.4734**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Full Name (Last, First, Middle Initial)

**B. WENDYROGERS.ORG**

Mailing Address 3030 S RURAL RD SUITE 120

City State Zip Code  
TEMPE AZ 85282

Purpose of Disbursement  
contribution

Candidate Name  
**WENDY ROGERS**

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

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    | / | 23    | / | 2014      |

**Transaction ID : SB23.4731**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
|-------|---|-------|---|-----------|

Amount of Each Disbursement this Period

|  |
|--|
|  |
|--|

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

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

|         |
|---------|
| 5000.00 |
|---------|

|         |
|---------|
| 5000.00 |
|---------|