

# 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

RESPONSIBLE LEADERSHIP FOR AMERICA

ADDRESS (number and street) 826 ORANGE AVE #470

Check if different than previously reported. (ACC) CORONADO CA 92118

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00559153

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 [MM] / [DD] / [YYYY] in the State of [ ]

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

Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [MM] / [DD] / [YYYY] 05 / 15 / 2014 through [MM] / [DD] / [YYYY] 06 / 30 / 2014

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 Deanna Hayes

Signature of Treasurer Deanna Hayes [Electronically Filed] Date 07 / 15 / 2014

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

**RESPONSIBLE LEADERSHIP FOR AMERICA**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="134402.83"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="28000.00"/>	<input type="text" value="223575.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="162402.83"/>	<input type="text" value="223575.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="132574.26"/>	<input type="text" value="193746.43"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="29828.57"/>	<input type="text" value="29828.57"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**RESPONSIBLE LEADERSHIP FOR AMERICA**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	28000.00	223350.00
(ii) Unitemized .....	0.00	225.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	28000.00	223575.00
(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) .....	28000.00	223575.00
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.).....	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))..... ▶	28000.00	223575.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	28000.00	223575.00

**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 .....	66618.87	87112.04
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	66618.87	87112.04
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	65955.39	106634.39
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	132574.26	193746.43
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	132574.26	193746.43

**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) .....	28000.00	223575.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	28000.00	223575.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	66618.87	87112.04
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	66618.87	87112.04

**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 17
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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

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)  
**RESPONSIBLE LEADERSHIP FOR AMERICA**

**A. Douglas Allred**  
Full Name (Last, First, Middle Initial)

Mailing Address 11452 El Camino Real #200

City San Diego State CA Zip Code 92130

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

Name of Employer Douglas Allred Company Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
05 / 23 / 2014  
Transaction ID : SA11AI.4282

Amount of Each Receipt this Period  
25000.00

Contribution

**B. Kim Fletcher**  
Full Name (Last, First, Middle Initial)

Mailing Address 530 Lomas Santa Fe Drive Suite C

City Solona Beach State CA Zip Code 92075

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

Name of Employer Investors Leasing Corp Occupation Real Estate Investment

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
05 / 19 / 2014  
Transaction ID : SA11AI.4284

Amount of Each Receipt this Period  
2000.00

Contribution

**C. Terry Lingenfelder**  
Full Name (Last, First, Middle Initial)

Mailing Address 530 Lomas Santa Fe Drive Suite C

City Solona Beach State CA Zip Code 92075

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

Name of Employer Terral Investment Co Occupation Real Estate Investment

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
05 / 21 / 2014  
Transaction ID : SA11AI.4286

Amount of Each Receipt this Period  
1000.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	28000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	28000.00

**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

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)  
**RESPONSIBLE LEADERSHIP FOR AMERICA**

Full Name (Last, First, Middle Initial) <b>A. Emissary Relations, LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2014
Mailing Address 3568 Front St Unit A		<b>Transaction ID : SB21B.4188</b>
City San Diego	State CA Zip Code 92103	
Purpose of Disbursement Fundraising Consulting	Candidate Name	Amount of Each Disbursement this Period 2000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Emissary Relations, LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2014
Mailing Address 3568 Front St Unit A		<b>Transaction ID : SB21B.4190</b>
City San Diego	State CA Zip Code 92103	
Purpose of Disbursement Fundraising Consulting	Candidate Name	Amount of Each Disbursement this Period 100.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Emissary Relations, LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 18 / 2014
Mailing Address 3568 Front St Unit A		<b>Transaction ID : SB21B.4189</b>
City San Diego	State CA Zip Code 92103	
Purpose of Disbursement Fundraising Consulting	Candidate Name	Amount of Each Disbursement this Period 410.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2510.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**RESPONSIBLE LEADERSHIP FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Emissary Relations, LLC**

Mailing Address 3568 Front St  
Unit A

City San Diego State CA Zip Code 92103

Purpose of Disbursement  
Fundraising Event Catering Supplies

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 20 / 2014

Transaction ID : SB21B.4187

Amount of Each Disbursement this Period

32.39

Full Name (Last, First, Middle Initial)

**B. Emissary Relations, LLC**

Mailing Address 3568 Front St  
Unit A

City San Diego State CA Zip Code 92103

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 22 / 2014

Transaction ID : SB21B.4186

Amount of Each Disbursement this Period

12500.00

Full Name (Last, First, Middle Initial)

**C. Emissary Relations, LLC**

Mailing Address 3568 Front St  
Unit A

City San Diego State CA Zip Code 92103

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 24 / 2014

Transaction ID : SB21B.4201

Amount of Each Disbursement this Period

2500.00

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

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

15032.39

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**RESPONSIBLE LEADERSHIP FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Emissary Relations, LLC**

Mailing Address 3568 Front St  
Unit A

City San Diego State CA Zip Code 92103

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 25 / 2014

**Transaction ID : SB21B.4209**

Amount of Each Disbursement this Period

210.00

Full Name (Last, First, Middle Initial)

**B. Foley & Lardner LLP**

Mailing Address 3579 Valley Centre Dr  
Suite 300

City San Diego State CA Zip Code 92130

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 20 / 2014

**Transaction ID : SB21B.4191**

Amount of Each Disbursement this Period

5394.30

Full Name (Last, First, Middle Initial)

**C. Foley & Lardner LLP**

Mailing Address 3579 Valley Centre Dr  
Suite 300

City San Diego State CA Zip Code 92130

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 20 / 2014

**Transaction ID : SB21B.4193**

Amount of Each Disbursement this Period

500.00

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

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

6104.30

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**RESPONSIBLE LEADERSHIP FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Foley & Lardner LLP**

Mailing Address 3579 Valley Centre Dr  
Suite 300

City San Diego State CA Zip Code 92130

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 20 / 2014

**Transaction ID : SB21B.4194**

Amount of Each Disbursement this Period

687.50

Full Name (Last, First, Middle Initial)

**B. Foley & Lardner LLP**

Mailing Address 3579 Valley Centre Dr  
Suite 300

City San Diego State CA Zip Code 92130

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 20 / 2014

**Transaction ID : SB21B.4195**

Amount of Each Disbursement this Period

5400.80

Full Name (Last, First, Middle Initial)

**C. Grand Slam Finance**

Mailing Address 5930 Republic of Texas Blvd

City Austin State TX Zip Code 78735

Purpose of Disbursement  
Accounting Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 13 / 2014

**Transaction ID : SB21B.4214**

Amount of Each Disbursement this Period

1500.00

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

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

7588.30

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**RESPONSIBLE LEADERSHIP FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Hertz**

Mailing Address 3202 N Harbor Dr

City San Diego State CA Zip Code 92101

Purpose of Disbursement  
Rental Car

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 05 / 2014

**Transaction ID : SB21B.4278**

Amount of Each Disbursement this Period

333.09

Full Name (Last, First, Middle Initial)

**B. Kevin Lawrence**

Mailing Address 826 Orange Ave #470

City Coronado State CA Zip Code 92118

Purpose of Disbursement  
Travel Expense Reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 27 / 2014

**Transaction ID : SB21B.4210**

Amount of Each Disbursement this Period

486.00

Full Name (Last, First, Middle Initial)

**C. Southwest Airlines**

Mailing Address PO Box 36647-1CR

City Dallas State TX Zip Code 75235

Purpose of Disbursement  
Travel-Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 27 / 2014

**Transaction ID : SB21B.4210.0**

Amount of Each Disbursement this Period

486.00

**[MEMO ITEM]**

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

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

819.09

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

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

FOR LINE NUMBER:  
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**RESPONSIBLE LEADERSHIP FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Kevin Lawrence**

Mailing Address 826 Orange Ave #470

City State Zip Code  
Coronado CA 92118

Purpose of Disbursement  
Travel Per Diem

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	13	/	2014

**Transaction ID : SB21B.4215**

Amount of Each Disbursement this Period

223.95
--------

Full Name (Last, First, Middle Initial)

**B. Kevin Lawrence**

Mailing Address 826 Orange Ave #470

City State Zip Code  
Coronado CA 92118

Purpose of Disbursement  
Travel Per Diem

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	13	/	2014

**Transaction ID : SB21B.4216**

Amount of Each Disbursement this Period

81.26
-------

Full Name (Last, First, Middle Initial)

**C. Miguel Marcino**

Mailing Address 826 Orange Ave Num 470

City State Zip Code  
Coronado CA 92118

Purpose of Disbursement  
Travel Expense Reimbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	20	/	2014

**Transaction ID : SB21B.4196**

Amount of Each Disbursement this Period

589.96
--------

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

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

895.17
--------

--

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**RESPONSIBLE LEADERSHIP FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. UPS Store**

Mailing Address 826 Orange Ave

City State Zip Code  
Coronado CA 92118

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	20	/	2014

Transaction ID : SB21B.4196.2

Amount of Each Disbursement this Period

301.00
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Miguel Marcino**

Mailing Address 826 Orange Ave Num 470

City State Zip Code  
Coronado CA 92118

Purpose of Disbursement  
Management Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	24	/	2014

Transaction ID : SB21B.4219

Amount of Each Disbursement this Period

10500.00
----------

Full Name (Last, First, Middle Initial)

**C. Miguel Marcino**

Mailing Address 826 Orange Ave Num 470

City State Zip Code  
Coronado CA 92118

Purpose of Disbursement  
Travel Expense Reimbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	25	/	2014

Transaction ID : SB21B.4204

Amount of Each Disbursement this Period

58.09
-------

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

10558.09
----------

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

--

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**RESPONSIBLE LEADERSHIP FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Miguel Marcino**

Mailing Address 826 Orange Ave Num 470

City State Zip Code  
Coronado CA 92118

Purpose of Disbursement  
Travel Expense Reimbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				2	5		2	0	1	4		

**Transaction ID : SB21B.4205**

Amount of Each Disbursement this Period

3	7	7	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Southwest Airlines**

Mailing Address PO Box 36647-1CR

City State Zip Code  
Dallas TX 75235

Purpose of Disbursement  
Travel-Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				2	5		2	0	1	4		

**Transaction ID : SB21B.4205.0**

Amount of Each Disbursement this Period

3	7	7	.	0	0
---	---	---	---	---	---

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Miguel Marcino**

Mailing Address 826 Orange Ave Num 470

City State Zip Code  
Coronado CA 92118

Purpose of Disbursement  
Thank You Cards

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				2	5		2	0	1	4		

**Transaction ID : SB21B.4208**

Amount of Each Disbursement this Period

1	4	8	.	9	4
---	---	---	---	---	---

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

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

5	2	5	.	9	4
---	---	---	---	---	---

5	2	5	.	9	4
---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**RESPONSIBLE LEADERSHIP FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Miguel Marcino**

Mailing Address 826 Orange Ave Num 470

City State Zip Code  
Coronado CA 92118

Purpose of Disbursement  
Management Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	24	/	2014

**Transaction ID : SB21B.4217**

Amount of Each Disbursement this Period

3589.63
---------

Full Name (Last, First, Middle Initial)

**B. Miguel Marcino**

Mailing Address 826 Orange Ave Num 470

City State Zip Code  
Coronado CA 92118

Purpose of Disbursement  
Management Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	24	/	2014

**Transaction ID : SB21B.4218**

Amount of Each Disbursement this Period

2625.00
---------

Full Name (Last, First, Middle Initial)

**C. Tom Shepard & Associates Inc**

Mailing Address 1620 Fifth Avenue  
Suite 750

City State Zip Code  
San Diego CA 92101

Purpose of Disbursement  
Political Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	15	/	2014

**Transaction ID : SB21B.4183**

Amount of Each Disbursement this Period

5039.20
---------

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

11253.83
----------

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

--

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**RESPONSIBLE LEADERSHIP FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Tom Shepard & Associates Inc**

Mailing Address 1620 Fifth Avenue  
Suite 750

City San Diego State CA Zip Code 92101

Purpose of Disbursement  
Political Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 15 / 2014

**Transaction ID : SB21B.4185**

Amount of Each Disbursement this Period

10022.40

Full Name (Last, First, Middle Initial)

**B.**

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

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

Amount of Each Disbursement this Period

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

M M / D D / Y 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)..... ▶

10022.40

65309.51

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) RESPONSIBLE LEADERSHIP FOR AMERICA
FEC IDENTIFICATION NUMBER C C00559153
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Strategic Solutions Inc.
Mailing Address 9771 Mission George Rd
City Santee State CA Zip Code 92071
Purpose of Expenditure Mailer Category/Type 004
Date of Public Distribution/Dissemination 05/14/2014
Amount 40991.00
Transaction ID : SE.4120
Date of Disbursement or Obligation 05/15/2014
Name of Federal Candidate KIRK JORGENSEN Support
Office Sought: House District: 52 State: CA
Disbursement For: Primary 2014

Full Name of Payee Turpin McLaughlin Communications
Mailing Address 5694 Mission Center Road #446
City San Diego State CA Zip Code 92108
Purpose of Expenditure Mailer Category/Type 004
Date of Public Distribution/Dissemination 05/28/2014
Amount 24964.39
Transaction ID : SE.4177
Date of Disbursement or Obligation 05/28/2014
Name of Federal Candidate KIRK JORGENSEN Support
Office Sought: House District: 52 State: CA
Disbursement For: Primary 2014

(a) SUBTOTAL of Itemized Independent Expenditures 65955.39
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 65955.39

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.
Deanna Hayes [Electronically Filed] Date 07/15/2014
Signature