

**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

WARRIORS FOR LIBERTY

ADDRESS (number and street)

2776 S ARLINGTON MILL DR #806

☐ Check if different than previously reported. (ACC)

ARLINGTON

VA

22206

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00545087

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

(c) 12-Day

PRE-Election

Report for the:

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

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

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

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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

Type or Print Name of Treasurer SCOTT B MACKENZIE

Signature of Treasurer

SCOTT B MACKENZIE

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

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

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

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

WARRIORS FOR LIBERTY

Report Covering the Period:

From:

 M M / D D / Y Y Y Y
 04 / 01 / 2014

To:

 M M / D D / Y Y Y Y
 06 / 30 / 2014

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, 2014 | | 19254.21 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 7280.86 | |
| (c) Total Receipts (from Line 19) | 5396.00 | 78011.56 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 12676.86 | 97265.77 |
| 7. Total Disbursements (from Line 31) | 9987.75 | 94576.66 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 2689.11 | 2689.11 |
| 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) | 167464.93 | |



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

WARRIORS FOR LIBERTY

Report Covering the Period:

From:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 0 | 1 | | 2 | 0 | 1 | 4 |

To:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 3 | 0 | | 2 | 0 | 1 | 4 |

| 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)..... | 880.00 | 17466.00 |
| (ii) Unitemized | 4516.00 | 57375.40 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 5396.00 | 74841.40 |
| (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) | 5396.00 | 74841.40 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 3170.16 |
| 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)) | 5396.00 | 78011.56 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 5396.00 | 78011.56 |

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 | 9987.75 | 93776.66 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 9987.75 | 93776.66 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 200.00 |
| 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 | 600.00 |
| 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)) .. | 9987.75 | 94576.66 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 9987.75 | 94576.66 |

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) | 5396.00 | 74841.40 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 5396.00 | 74841.40 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ► | 9987.75 | 93776.66 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) ► | 9987.75 | 93776.66 |

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 20

☒ 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)

WARRIORS FOR LIBERTY

Full Name (Last, First, Middle Initial)

A. DE ETTE BARNER 910

Mailing Address 718 LA PORTADA ST

City State Zip Code
 SOUTH PASADENA CA 91030

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

04 / 11 / 2014

Transaction ID : SA11Al.17795

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

B. MS MARY K COLWELL 453

Mailing Address 140 MARICOPA CIR

City State Zip Code
 ENON OH 45323

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

04 / 03 / 2014

Transaction ID : SA11Al.17819

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

C. MRS HELEN R DECKER 760

Mailing Address PO BOX 170009

City State Zip Code
 ARLINGTON TX 76003

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 14 / 2014

Transaction ID : SA11Al.17828

Amount of Each Receipt this Period

200.00

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

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

380.00

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 20

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

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NAME OF COMMITTEE (In Full)

WARRIORS FOR LIBERTY

Full Name (Last, First, Middle Initial)

A. MICHAEL LEMON 980

Mailing Address 18402 44TH AVE W

City
LYNNWOOD

State Zip Code
WA 98037

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ELECTRICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2014

Transaction ID : SA11AI.17873

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. MR JAMES PANKONIEN 537

Mailing Address 2313 GOLD DR

City
FITCHBURG

State Zip Code
WI 53711

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 22 / 2014

Transaction ID : SA11AI.17905

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. MRS MARLENE J SCARDINO 497

Mailing Address 7225 HUGHSTON RD

City
HARBOR SPRINGS

State Zip Code
MI 49740

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 03 / 2014

Transaction ID : SA11AI.17923

Amount of Each Receipt this Period

75.00

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

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

275.00

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

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

FOR LINE NUMBER: PAGE 8 OF 20
(check only one)

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

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NAME OF COMMITTEE (In Full)

WARRIORS FOR LIBERTY

Full Name (Last, First, Middle Initial)

A. MRS SUSAN TITTA 077

Mailing Address 7 OAKCREST CT

City
HOLMDEL

State Zip Code
NJ 07733

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 02 / 2014

Transaction ID : SA11AI.17941

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. JOAN WALLACE 706

Mailing Address 2232 N BEGLIS PKWY

City
SULPHUR

State Zip Code
LA 70663

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 02 / 2014

Transaction ID : SA11AI.17949

Amount of Each Receipt this Period

75.00

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)..... ►

225.00

880.00

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

WARRIORS FOR LIBERTY

A. CAPITAL CAGING

00:

748.00

WARRIORS FOR LIBERTY

Category/
Type

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

State: District:

B. CAPITAL CAGING

00

| Response | Percentage |
|----------|------------|
| Yes | 454.70 |

WARRIORS FOR LIBERTY

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

C. CENTURY DATA MAILING SERVICE INC

003

3577.25

WARRIORS FOR LIBERTY

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

4779.95

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

WARRIORS FOR LIBERTY

A. CENTURY DATA MAILING SERVICE INC

Category/
Type

WARRIORS FOR LIBERTY

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

53.66

B. CENTURY DATA SYSTEMS CORP

Category/
Type

WARRIORS FOR LIBERTY

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

360.00

C. DONOR BUREAU

Category/
Type

WARRIORS FOR LIBERTY

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Transaction ID : SB21B.17777

Amount of Each Disbursement this Period

509.38

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

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

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

PAGE 11 OF 20

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)

WARRIORS FOR LIBERTY

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR

| | | |
|-----------------|-------------|-------------------|
| City FAIRFAX | State VA | Zip Code 22030 |
|-----------------|-------------|-------------------|

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

WARRIORS FOR LIBERTYCategory/
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 |
| 04 | | 01 | | 2014 |

Transaction ID : SB21B.17778

Amount of Each Disbursement this Period

| |
|-------|
| 67.92 |
|-------|

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR

| | | |
|-----------------|-------------|-------------------|
| City FAIRFAX | State VA | Zip Code 22030 |
|-----------------|-------------|-------------------|

Purpose of Disbursement
CUSTOM CREDIT BILLING

001

Candidate Name

WARRIORS FOR LIBERTYCategory/
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 |
| 04 | | 07 | | 2014 |

Transaction ID : SB21B.17781

Amount of Each Disbursement this Period

| |
|-------|
| 40.25 |
|-------|

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR

| | | |
|-----------------|-------------|-------------------|
| City FAIRFAX | State VA | Zip Code 22030 |
|-----------------|-------------|-------------------|

Purpose of Disbursement
MERCHANT SERVICE CHARGE

001

Candidate Name

WARRIORS FOR LIBERTYCategory/
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 |
| 04 | | 08 | | 2014 |

Transaction ID : SB21B.17784

Amount of Each Disbursement this Period

| |
|--------|
| 257.03 |
|--------|

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

365.20

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

WARRIORS FOR LIBERTY

A. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

Transaction ID : SB21B.17779

001

Category/
Type

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

State: District:

Amount of Each Disbursement this Period

| Age Group | Percentage |
|-----------|------------|
| 18-24 | ~15% |
| 25-34 | 28.66% |
| 35-44 | ~18% |
| 45-54 | ~12% |
| 55-64 | ~10% |
| 65-74 | ~8% |
| 75-84 | ~5% |
| 85+ | ~2% |

B. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.17782

001

Category/
Type

Disbursement For:

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

State: District:

Amount of Each Disbursement this Period

A horizontal bar with a value of 29.25. The bar is light gray with a darker gray outline. The value "29.25" is displayed in black text at the right end of the bar.

C. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M / D D / Y Y Y Y
05 07 2014

Transaction ID : SB21B.17785

001

Category/
Type

Disbursement For:

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

State: District:

Amount of Each Disbursement this Period



84.27

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

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

Percentage of people who have ever been in a romantic relationship

142.18

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

PAGE 13 OF 20

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)

WARRIORS FOR LIBERTY

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06 | | 02 | | 2014 |

Mailing Address 11325 RANDOM HILLS DR

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| FAIRFAX | VA | 22030 |

Transaction ID : SB21B.17780Purpose of Disbursement
SERVICE CHARGE

001

Amount of Each Disbursement this Period

Candidate Name

WARRIORS FOR LIBERTYCategory/
Type

11.87

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06 | | 04 | | 2014 |

Mailing Address 11325 RANDOM HILLS DR

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| FAIRFAX | VA | 22030 |

Transaction ID : SB21B.17783Purpose of Disbursement
CUSTOM CREDIT BILLING

001

Amount of Each Disbursement this Period

Candidate Name

WARRIORS FOR LIBERTYCategory/
Type

26.25

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06 | | 09 | | 2014 |

Mailing Address 11325 RANDOM HILLS DR

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| FAIRFAX | VA | 22030 |

Transaction ID : SB21B.17786Purpose of Disbursement
MERCHANT SERVICE CHARGE

001

Amount of Each Disbursement this Period

Candidate Name

WARRIORS FOR LIBERTYCategory/
Type

59.31

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)..... ►

97.43

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

WARRIORS FOR LIBERTY

A. INTEGRAM

003

3474.23

WARRIORS FOR LIBERTY

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

B. SIMPKINS ESCROW LLC

001



205.72

WARRIORS FOR LIBERTY

Category/
Type

Disbursement For:

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

State: District:

Full Name (Last, First, Middle Initial)

C.

The diagram shows three rectangular boxes representing DNA sequences. The first box contains 'M' at the top left and 'M' at the top right, with a small tick mark at the bottom center. The second box contains 'D' at the top left and 'D' at the top right, with a small tick mark at the bottom center. The third box contains 'Y' at the top left, 'Y' at the top right, and two 'Y's in the middle, with small tick marks at the bottom left, bottom center, and bottom right. The boxes are separated by slashes (/).

category/
Type

The diagram shows a rectangular frame with 12 vertical members and 2 horizontal members. A cross-section of a member is shown, indicating a rectangular shape with a central void.

Candidate Name

Disbursement For:

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

State: District:

3679.95

9987.75

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

PAGE 15 OF 20

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.17726

WARRIORS FOR LIBERTY**LOAN SOURCE** Full Name (Last, First, Middle Initial)

HON KIERAN LALOR

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 105 STONY BROOK RD

City FISHKILL

State NY

ZIP Code 12524

Original Amount of Loan

500.00

Cumulative Payment To Date

200.00

Balance Outstanding at Close of This Period

300.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
01 / 28 / 2014

Date Due

M M / D D / Y Y Y Y

UPON DEMAND

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

300.00

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

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

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

PAGE 16 OF 20

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.17727

WARRIORS FOR LIBERTY**LOAN SOURCE** Full Name (Last, First, Middle Initial)

HON KIERAN LALOR

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 105 STONY BROOK RD

City FISHKILL

State NY

ZIP Code 12524

Original Amount of Loan

2270.16

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2270.16

TERMS

Date Incurred

MM / DD / YYYY
01 / 28 / 2014

Date Due

MM / DD / YYYY
UPON DEMAND

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

2270.16

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

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

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

PAGE 17 OF 20

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.17728

WARRIORS FOR LIBERTY**LOAN SOURCE** Full Name (Last, First, Middle Initial)
HON KIERAN LALOR

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 105 STONY BROOK RD

City FISHKILL

State NY

ZIP Code 12524

Original Amount of Loan

400.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

400.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
02 / 12 / 2014

Date Due

M M / D D / Y Y Y Y

UPON DEMAND

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

400.00

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

2970.16

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

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

PAGE 18 OF 20

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

NAME OF COMMITTEE (In Full)

WARRIORS FOR LIBERTY

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

BASE CONNECT INCNature of Debt (Purpose):
DIRECT MAIL - CREATIVEMailing Address 1155 - 15TH STREET NW
SUITE 410City State Zip Code
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

26611.21

Transaction ID : SD10.15376

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

26611.21

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

CAPITAL CAGINGNature of Debt (Purpose):
CAGING SERVICES

Mailing Address 504 SHAW RD

City State Zip Code
STERLING VA 20166

Outstanding Balance Beginning This Period

329.04

Transaction ID : SD10.15378

Amount Incurred This Period

873.66

Payment This Period

1202.70

Outstanding Balance at Close of This Period

0.00

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

CENTURY DATA SYSTEMS CORPNature of Debt (Purpose):
DATA PROCESSINGMailing Address 1155 - 15TH STREET NW
SUITE 410City State Zip Code
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

1460.30

Transaction ID : SD10.17704

Amount Incurred This Period

0.00

Payment This Period

360.00

Outstanding Balance at Close of This Period

1100.30

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

27711.51

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 19 OF 20

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

NAME OF COMMITTEE (In Full)

WARRIORS FOR LIBERTY

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

COLORTREE GROUP

Nature of Debt (Purpose):

DIRECT MAIL - PRINTING & MAILSHOP

Mailing Address 8000 VILLA PARK DR

City State

RICHMOND

Zip Code

VA

23228

Outstanding Balance Beginning This Period

8258.10

Transaction ID : SD10.15387

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8258.10

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

CONSOLIDATED MAILING SERVICES INC

Nature of Debt (Purpose):

DIRECT MAIL - PRINTING & MAILSHOP

Mailing Address 504 SHAW RD

City State

STERLING

Zip Code

VA

20166

Outstanding Balance Beginning This Period

44099.15

Transaction ID : SD10.15388

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

44099.15

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

DONOR BUREAU

Nature of Debt (Purpose):

LIST ENHANCEMENT

Mailing Address 1900 NORTH CULPEPPER ST

City

ARLINGTON

State

VA

Zip Code

22207

Outstanding Balance Beginning This Period

1752.63

Transaction ID : SD10.15390

Amount Incurred This Period

0.00

Payment This Period

509.38

Outstanding Balance at Close of This Period

1243.25

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

53600.50

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 20

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

NAME OF COMMITTEE (In Full)

WARRIORS FOR LIBERTY

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

INTEGRAM

Nature of Debt (Purpose):

DIRECT MAIL - PRINTING & MAILSHOP

Mailing Address 22695 COMMERCE CENTER CT

City State

DULLES

Zip Code

VA

20166

Outstanding Balance Beginning This Period

14532.55

Transaction ID : SD10.15389

Amount Incurred This Period

0.00

Payment This Period

3474.23

Outstanding Balance at Close of This Period

11058.32

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

LEGACY LIST MARKETING INC

Nature of Debt (Purpose):

DIRECT MAIL - PRINTING & MAILSHOP

Mailing Address 1155 - 15TH STREET NW

SUITE 410

City State

WASHINGTON

Zip Code

DC

20005

Outstanding Balance Beginning This Period

68124.44

Transaction ID : SD10.15391

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

68124.44

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

MACKENZIE & COMPANY

Nature of Debt (Purpose):

CONSULTING - COMPLIANCE

Mailing Address 2776 S ARLINGTON MILL DR #806

City

ARLINGTON

State

VA

Zip Code

22206

Outstanding Balance Beginning This Period

4000.00

Transaction ID : SD10.17710

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

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

83182.76

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

164494.77

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

2970.16

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

167464.93