

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

National Campaign

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="2972.04"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="223079.00"/>	<input type="text" value="228189.00"/>
(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="226051.04"/>	<input type="text" value="228189.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="99773.68"/>	<input type="text" value="101911.64"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="126277.36"/>	<input type="text" value="126277.36"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="292229.13"/>	

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

National Campaign

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).....	2000.00	2000.00
(ii) Unitemized	221079.00	226189.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	223079.00	228189.00
(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)	223079.00	228189.00
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))..... ▶	223079.00	228189.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	223079.00	228189.00

DETAILED SUMMARY PAGE
of Disbursements

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	19616.79	20254.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	19616.79	20254.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	2500.00
24. Independent Expenditures (use Schedule E)	79156.89	79156.89
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)) ..	99773.68	101911.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	99773.68	101911.64

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)	223079.00	228189.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	223079.00	228189.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	19616.79	20254.75
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	19616.79	20254.75

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

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

FOR LINE NUMBER: PAGE 6 OF 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
National Campaign

Full Name (Last, First, Middle Initial)
A. Julie Gilson

Mailing Address 2535 Bent Creek Way

City State Zip Code
Cumming GA 30041

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

Name of Employer Refused Occupation Rn

Receipt For: 2014
 Primary General
 Other (specify) **Runoff**

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014
Transaction ID : SA11AI.14215

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Isaac Johnson

Mailing Address 1006 E Club Blvd

City State Zip Code
Durham NC 27704

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

Name of Employer None Occupation None

Receipt For: 2014
 Primary General
 Other (specify) **Runoff**

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 02 / 2014
Transaction ID : SA11AI.4672

Amount of Each Receipt this Period
1500.00

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	2000.00

**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)
National Campaign

Full Name (Last, First, Middle Initial)

A. National Capital Bank

Mailing Address 316 Pennsylvania Ave SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Bank charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 02 / 2014

Transaction ID : SB21B.23540

Amount of Each Disbursement this Period

390.33

Full Name (Last, First, Middle Initial)

B. National Capital Bank

Mailing Address 316 Pennsylvania Ave SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Bank charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 05 / 2014

Transaction ID : SB21B.23546

Amount of Each Disbursement this Period

2337.46

Full Name (Last, First, Middle Initial)

C. Pitney Bowes

Mailing Address PO Box 371874

City Pittsburgh State PA Zip Code 15250-7874

Purpose of Disbursement
Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2014

Transaction ID : SB21B.23593

Amount of Each Disbursement this Period

914.42

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

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

3642.21

**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)

National Campaign

Full Name (Last, First, Middle Initial)

A. Pitney Bowes Presort Service, Inc

Mailing Address PO Box 809369

City Chicago State IL Zip Code 60680-9369

Purpose of Disbursement
Postage and direct mail services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2014			

Transaction ID : SB21B.23582

Amount of Each Disbursement this Period

4	7	3	5	.	0	8
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Full Name (Last, First, Middle Initial)

B. PMK Accounting

Mailing Address 1201 N. Orange St Ste 700 #7427

City Wilmington State DE Zip Code 19801-1186

Purpose of Disbursement
Accounting services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			01			2014			

Transaction ID : SB21B.23579

Amount of Each Disbursement this Period

1	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. PMK Accounting

Mailing Address 1201 N. Orange St Ste 700 #7427

City Wilmington State DE Zip Code 19801-1186

Purpose of Disbursement
Accounting services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2014			

Transaction ID : SB21B.23581

Amount of Each Disbursement this Period

1	0	0	.	0	0
---	---	---	---	---	---

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

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

6	7	3	5	.	0	8
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**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)

National Campaign

Full Name (Last, First, Middle Initial)

A. US Postal Service

Mailing Address 900 Brentwood Rd NE

City Washington State DC Zip Code 20066

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2014

Transaction ID : SB21B.23577

Amount of Each Disbursement this Period

5000.00

B. US Postal Service

Full Name (Last, First, Middle Initial)

Mailing Address 900 Brentwood Rd NE

City Washington State DC Zip Code 20066

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2014

Transaction ID : SB21B.23580

Amount of Each Disbursement this Period

4179.50

C.

Full Name (Last, First, Middle Initial)

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

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

9179.50

19556.79

**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)

National Campaign

Full Name (Last, First, Middle Initial)

A. Benishek for Congress, Inc

Mailing Address PO Box 108

City Glandstone State MI Zip Code 49837

Purpose of Disbursement
Political Contribution

011

Candidate Name

Dan Benishek

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MI District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

Transaction ID : SB23.23558

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Jenkins for Congress

Mailing Address PO Box 727

City Huntington State WV Zip Code 25711

Purpose of Disbursement
Political contribution

011

Candidate Name

Evan Jenkins

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WV District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

Transaction ID : SB23.23572

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. Marilinda Garcia for Congress

Mailing Address PO Box 821

City Salem State NH Zip Code 03079

Purpose of Disbursement
Political Contribution

011

Candidate Name

Marilinda Garcia

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NH District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

Transaction ID : SB23.23573

Amount of Each Disbursement this Period

250.00

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

750.00

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

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**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)

National Campaign

Full Name (Last, First, Middle Initial)

A. Mike Bost for Congress Committee

Mailing Address P.O. Box 1212

City State Zip Code
Murphysboro IL 62966

Purpose of Disbursement
Political Contribution

011

Category/
Type

Candidate Name

Mike Bost

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 13

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 23 / 2014

Transaction ID : SB23.23570

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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)..... ▶

250.00

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

1000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 21
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
National Campaign

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Issue Advocacy LLC	Nature of Debt (Purpose): Phone banks
Mailing Address 1741 S. Cleveland Ave., Suite 199	
City State Zip Code Sioux Falls SD 57103	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.23588	
Amount Incurred This Period 55070.40	Payment This Period 0.00	Outstanding Balance at Close of This Period 55070.40

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Issue Advocacy LLC	Nature of Debt (Purpose): Phone banks
Mailing Address 1741 S. Cleveland Ave., Suite 199	
City State Zip Code Sioux Falls SD 57103	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.23589	
Amount Incurred This Period 16847.25	Payment This Period 0.00	Outstanding Balance at Close of This Period 16847.25

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Issue Advocacy LLC	Nature of Debt (Purpose): Direct mail services
Mailing Address 1741 S. Cleveland Ave., Suite 199	
City State Zip Code Sioux Falls SD 57103	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.23590	
Amount Incurred This Period 287.44	Payment This Period 0.00	Outstanding Balance at Close of This Period 287.44

1) SUBTOTALS This Period This Page (optional)..... ▶	72205.09
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 13 OF 21
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
National Campaign

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Issue Advocacy LLC	Nature of Debt (Purpose): Phone banks
Mailing Address 1741 S. Cleveland Ave., Suite 199	
City State Zip Code Sioux Falls SD 57103	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4556	
Amount Incurred This Period 15448.13	Payment This Period 15448.13	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Issue Advocacy LLC	Nature of Debt (Purpose): Phone banks
Mailing Address 1741 S. Cleveland Ave., Suite 199	
City State Zip Code Sioux Falls SD 57103	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4568	
Amount Incurred This Period 15448.13	Payment This Period 15448.13	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Issue Advocacy LLC	Nature of Debt (Purpose): Phone banks
Mailing Address 1741 S. Cleveland Ave., Suite 199	
City State Zip Code Sioux Falls SD 57103	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4571	
Amount Incurred This Period 15750.00	Payment This Period 15750.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 14 OF 21
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
National Campaign

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Issue Advocacy LLC	Nature of Debt (Purpose): Phone banks
Mailing Address 1741 S. Cleveland Ave., Suite 199	
City State Zip Code Sioux Falls SD 57103	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4574	
Amount Incurred This Period 17062.50	Payment This Period 17062.50	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Issue Advocacy LLC	Nature of Debt (Purpose): Phone banks
Mailing Address 1741 S. Cleveland Ave., Suite 199	
City State Zip Code Sioux Falls SD 57103	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.23594	
Amount Incurred This Period 155906.63	Payment This Period 0.00	Outstanding Balance at Close of This Period 155906.63

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Issue Advocacy LLC	Nature of Debt (Purpose): Phone banks
Mailing Address 1741 S. Cleveland Ave., Suite 199	
City State Zip Code Sioux Falls SD 57103	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.23595	
Amount Incurred This Period 46344.38	Payment This Period 0.00	Outstanding Balance at Close of This Period 46344.38

1) SUBTOTALS This Period This Page (optional)..... ▶	202251.01
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 15 OF 21
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
National Campaign

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Issue Advocacy LLC	Nature of Debt (Purpose): Direct mail services
Mailing Address 1741 S. Cleveland Ave., Suite 199	
City State Zip Code Sioux Falls SD 57103	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.23596	
Amount Incurred This Period 1824.90	Payment This Period 0.00	Outstanding Balance at Close of This Period 1824.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Issue Advocacy LLC	Nature of Debt (Purpose): Website services
Mailing Address 1741 S. Cleveland Ave., Suite 199	
City State Zip Code Sioux Falls SD 57103	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.23597	
Amount Incurred This Period 500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Issue Advocacy LLC	Nature of Debt (Purpose): Phone banks
Mailing Address 1741 S. Cleveland Ave., Suite 199	
City State Zip Code Sioux Falls SD 57103	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4578	
Amount Incurred This Period 15448.13	Payment This Period 15448.13	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	2324.90
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 16 OF 21
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
National Campaign

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Issue Advocacy LLC	Nature of Debt (Purpose): Phone banks
Mailing Address 1741 S. Cleveland Ave., Suite 199	
City State Zip Code Sioux Falls SD 57103	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.4598	
Amount Incurred This Period <input type="text" value="15448.13"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="15448.13"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="15448.13"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="292229.13"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="292229.13"/>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Campaign	FEC IDENTIFICATION NUMBER ▼ C C00563759
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Political Issue Advocacy LLC [MEMO ITEM]	Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2014
Mailing Address 1741 S. Cleveland Ave., Suite 199	Amount 15448.13
City State Zip Code Sioux Falls SD 57103	Transaction ID : SE.4555 Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Phone banks	Category/Type
Name of Federal Candidate Joni Ernst	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
15448.13	

Full Name of Payee Political Issue Advocacy LLC [MEMO ITEM]	Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 27 / 2014
Mailing Address 1741 S. Cleveland Ave., Suite 199	Amount 15448.13
City State Zip Code Sioux Falls SD 57103	Transaction ID : SE.4562 Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Phone banks	Category/Type
Name of Federal Candidate Tom Cotton	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AR Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
15448.13	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Ann Mattson
Signature

[Electronically Filed]

Date MM / DD / YYYY
11 / 24 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Campaign
FEC IDENTIFICATION NUMBER C C00563759
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Political Issue Advocacy LLC [MEMO ITEM]
Mailing Address 1741 S. Cleveland Ave., Suite 199
City Sioux Falls State SD Zip Code 57103
Purpose of Expenditure Phone banks Category/Type
Name of Federal Candidate Dan Sullivan [X] Support [] Oppose
Calendar Year-To-Date Per Election for Office Sought 15750.00

Date of Public Distribution/Dissemination 10 / 27 / 2014
Amount 15750.00
Transaction ID : SE.4563
Date of Disbursement or Obligation
Office Sought: [] House District: []
[] President [X] Senate State: AK
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Political Issue Advocacy LLC [MEMO ITEM]
Mailing Address 1741 S. Cleveland Ave., Suite 199
City Sioux Falls State SD Zip Code 57103
Purpose of Expenditure Phone banks Category/Type
Name of Federal Candidate Bill Cassidy [X] Support [] Oppose
Calendar Year-To-Date Per Election for Office Sought 17062.50

Date of Public Distribution/Dissemination 10 / 27 / 2014
Amount 17062.50
Transaction ID : SE.4564
Date of Disbursement or Obligation
Office Sought: [] House District: []
[] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Ann Mattson [Electronically Filed] Date 11 / 24 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Campaign
FEC IDENTIFICATION NUMBER C C00563759
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Political Issue Advocacy LLC
[MEMO ITEM]
Mailing Address 1741 S. Cleveland Ave., Suite 199
City Sioux Falls State SD Zip Code 57103
Purpose of Expenditure Phone banks
Name of Federal Candidate Bill Cassidy Support
Calendar Year-To-Date Per Election for Office Sought 15448.13

Date of Public Distribution/Dissemination 11/10/2014
Amount 15448.13
Transaction ID : SE.4575
Date of Disbursement or Obligation
Disbursement For: Other (specify) Runoff

Full Name of Payee Political Issue Advocacy LLC
Mailing Address 1741 S. Cleveland Ave., Suite 199
City Sioux Falls State SD Zip Code 57103
Purpose of Expenditure Phone bank payment for Ind Exp made on 10/20/14 Ernst
Name of Federal Candidate Joni Ernst Support
Calendar Year-To-Date Per Election for Office Sought 15448.13

Date of Public Distribution/Dissemination 11/13/2014
Amount 15448.13
Transaction ID : SE.4580
Date of Disbursement or Obligation
Disbursement For: General

(a) SUBTOTAL of Itemized Independent Expenditures 15448.13
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Ann Mattson [Electronically Filed] Date 11/24/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Campaign
FEC IDENTIFICATION NUMBER C C00563759

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Political Issue Advocacy LLC

Date of Public Distribution/Dissemination

Mailing Address 1741 S. Cleveland Ave., Suite 199

Amount

City State Zip Code Sioux Falls SD 57103

Transaction ID : SE.4586
Date of Disbursement or Obligation

Purpose of Expenditure Phone banks - payment for Ind Exp on 10/27/14 Cotton
Category/Type

11 / 13 / 2014

Name of Federal Candidate Tom Cotton
Support Oppose

Office Sought: House Senate State: AR

Calendar Year-To-Date Per Election for Office Sought 15448.13

Disbursement For: Primary General 2014

Full Name of Payee Political Issue Advocacy LLC

Date of Public Distribution/Dissemination

Mailing Address 1741 S. Cleveland Ave., Suite 199

Amount

City State Zip Code Sioux Falls SD 57103

Transaction ID : SE.4587
Date of Disbursement or Obligation

Purpose of Expenditure Phone banks - payment for Ind Exp on 10/27/14 Sullivan
Category/Type

11 / 13 / 2014

Name of Federal Candidate Dan Sullivan
Support Oppose

Office Sought: House Senate State: AK

Calendar Year-To-Date Per Election for Office Sought 15750.00

Disbursement For: Primary General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 31198.13
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Ann Mattson [Electronically Filed] Date 11 / 24 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Campaign
FEC IDENTIFICATION NUMBER C C00563759
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Political Issue Advocacy LLC
Mailing Address 1741 S. Cleveland Ave., Suite 199
City Sioux Falls State SD Zip Code 57103
Purpose of Expenditure Phone banks - payment for Ind Exp on 10/27/14 Cassidy
Category/Type
Name of Federal Candidate Bill Cassidy [X] Support [] Oppose
Calendar Year-To-Date Per Election for Office Sought 17062.50

Date of Public Distribution/Dissemination
Amount 17062.50
Transaction ID : SE.4588
Date of Disbursement or Obligation 11/13/2014
Office Sought: [] House District: []
[] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014
[] Other (specify)

Full Name of Payee Political Issue Advocacy LLC
Mailing Address 1741 S. Cleveland Ave., Suite 199
City Sioux Falls State SD Zip Code 57103
Purpose of Expenditure Phone banks - payment for Ind Exp on 11/10/14 Cassidy
Category/Type
Name of Federal Candidate Bill Cassidy [X] Support [] Oppose
Calendar Year-To-Date Per Election for Office Sought 15448.13

Date of Public Distribution/Dissemination
Amount 15448.13
Transaction ID : SE.4589
Date of Disbursement or Obligation 11/13/2014
Office Sought: [] House District: []
[] President [X] Senate State: LA
Disbursement For: [] Primary [] General 2014
[X] Other (specify) Runoff

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 32510.63; (b) SUBTOTAL of Unitemized Independent Expenditures; (c) TOTAL Independent Expenditures 79156.89

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.
Ann Mattson [Electronically Filed] Date 11/24/2014
Signature