

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

NextGen Committee

ADDRESS (number and street) ▼

555 Capitol Mall, Suite 1425

☐ Check if different than previously reported. (ACC)

Sacramento

CA

95814

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00542779

3. IS THIS REPORT

☐

NEW (N)

OR

☒

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

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

(c) 12-Day

PRE-Election

Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☒

Special (12S)

Election on

06

25

2013

in the State of

MA

(d) 30-Day

POST-Election

Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the State of

5. Covering Period

04

11

2013

through

06

05

2013

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

Type or Print Name of Treasurer Thomas F. Steyer

Signature of Treasurer

Thomas F. Steyer

[Electronically Filed]

Date

06

14

2013

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

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

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NextGen Committee

Report Covering the Period:

From:

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

To:

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div>Y Y Y Y Y 2013</div>		<div>0.00</div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div>212220.00</div>	
(c) Total Receipts (from Line 19)	<div>1114850.00</div>	<div>1866642.90</div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div>1327070.00</div>	<div>1866642.90</div>
7. Total Disbursements (from Line 31).....	<div>686526.63</div>	<div>1226099.53</div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div>640543.37</div>	<div>640543.37</div>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<div>165304.00</div>	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

NextGen Committee

Report Covering the Period:

From:

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

To:

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

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date
11. Contributions (other than loans) From:**(a) Individuals/Persons Other**

Than Political Committees

(i) Itemized (use Schedule A).....

1020250.00

1772042.90

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

1020250.00

1772042.90

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ►

1020250.00

1772042.90

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

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

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

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

94600.00

94600.00

18. Transfers from Non-Federal and Levin Funds**(a) Non-Federal Account**

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

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

0.00

0.00

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

12, 13, 14, 15, 16, 17, and 18(c))..... ►

1114850.00

1866642.90

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ►

1114850.00

1866642.90

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	39019.31	153012.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	39019.31	153012.21
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	250000.00
24. Independent Expenditures (use Schedule E)	611007.32	756587.32
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	36500.00	66500.00
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)) ..	686526.63	1226099.53
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	686526.63	1226099.53

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1020250.00	1772042.90
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1020250.00	1772042.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	39019.31	153012.21
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	39019.31	153012.21

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

Form/Schedule: F3XA
Transaction ID :

Update Summary Page, Schedule B, Schedule D and Schedule E

Form/Schedule:
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 62
(check only one)

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

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

NAME OF COMMITTEE (In Full)

NextGen Committee

Full Name (Last, First, Middle Initial)

A. NextGen Action

Mailing Address 351 California Street, Suite 1200

City State Zip Code
 San Francisco CA 94104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20250.00

Date of Receipt

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

Transaction ID : INCA108

Amount of Each Receipt this Period

12500.00

Full Name (Last, First, Middle Initial)

B. NextGen Action

Mailing Address 351 California Street, Suite 1200

City State Zip Code
 San Francisco CA 94104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20250.00

Date of Receipt

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

Transaction ID : INCA109

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

C. NextGen Action

Mailing Address 351 California Street, Suite 1200

City State Zip Code
 San Francisco CA 94104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20250.00

Date of Receipt

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

Transaction ID : INCA110

Amount of Each Receipt this Period

6250.00

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

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

20250.00

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

Form/Schedule: SA11AI

Transaction ID : INCA108

In-kind contribution: Consulting Services

Form/Schedule: SA11AI

Transaction ID: INCA109

In-kind contribution: Consulting Services

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

Form/Schedule: SA11AI

Transaction ID : INCA110

In-kind contribution: Consulting Services

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

NextGen Committee

Full Name (Last, First, Middle Initial)

A. Thomas F. Steyer

Mailing Address One Maritime Plaza, Suite 2100

City State Zip Code
 San Francisco CA 94111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Next Generation

Co-founding Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750000.00

Date of Receipt

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

Transaction ID : INCA66

Amount of Each Receipt this Period

1000000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

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

1000000.00

1020250.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

NextGen Committee

Full Name (Last, First, Middle Initial)

A. Sadler Strategic Media, Inc.

Mailing Address 12103 Viewcrest Road

City State Zip Code
 Studio City CA 91604

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

39600.00

Date of Receipt

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

Transaction ID : INCA57

Amount of Each Receipt this Period

39600.00

Refund

Full Name (Last, First, Middle Initial)

B. Winning Connections, Inc.

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

City State Zip Code
 Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55000.00

Date of Receipt

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

Transaction ID : INCA49

Amount of Each Receipt this Period

55000.00

Refund

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

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

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

94600.00

94600.00

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

PAGE 12 OF 62

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

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NAME OF COMMITTEE (In Full)

NextGen Committee

Full Name (Last, First, Middle Initial)

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

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y
04 16 2013**Transaction ID : EXPB39**

Amount of Each Disbursement this Period

27150.00

Full Name (Last, First, Middle Initial)

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

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y
05 21 2013**Transaction ID : EXPB141**

Amount of Each Disbursement this Period

9092.29

Full Name (Last, First, Middle Initial)

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

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y
05 21 2013**Transaction ID : EXPB143**

Amount of Each Disbursement this Period

31615.00

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

67857.29

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

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

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NAME OF COMMITTEE (In Full)

NextGen Committee

Full Name (Last, First, Middle Initial)

A. DGA Productions

Mailing Address 50 Hunt Street

City

Watertown

State

MA

Zip Code

02472

Purpose of Disbursement

Camera Rental for Press Conference

007

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

1351.13

Full Name (Last, First, Middle Initial)

B. HSC, Inc.

Mailing Address 360 Grand Avenue, Suite 138

City

Oakland

State

CA

Zip Code

94610

Purpose of Disbursement

Campaign Research & Expenses

005

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

23003.01

Full Name (Last, First, Middle Initial)

C. Jane Kleeb

Mailing Address 1010 North Denver Avenue

City

Hastings

State

NE

Zip Code

68901

Purpose of Disbursement

Travel Reimbursement

002

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

3223.50

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

27577.64

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

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

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NAME OF COMMITTEE (In Full)

NextGen Committee

Full Name (Last, First, Middle Initial)

A. Olson Hagel & Fishburn, LLP

Mailing Address 555 Capitol Mall, Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
Legal & Reporting Services

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 15 2013
Transaction ID : EXPB32

Amount of Each Disbursement this Period

12865.92

Full Name (Last, First, Middle Initial)

B. Olson Hagel & Fishburn, LLP

Mailing Address 555 Capitol Mall, Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
Legal & Reporting Services

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 15 2013
Transaction ID : EXPB50

Amount of Each Disbursement this Period

7970.63

Full Name (Last, First, Middle Initial)

C. Sadler Strategic Media, Inc.

Mailing Address 12103 Viewcrest Road

City Studio City State CA Zip Code 91604

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

24A

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

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 15 2013
Transaction ID : EXPB21

Amount of Each Disbursement this Period

-49700.00

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

-28863.45

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

NextGen Committee

22000.00

2247.83

3200.00

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

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

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NAME OF COMMITTEE (In Full)

NextGen Committee

Full Name (Last, First, Middle Initial)

A. Winning Connections, Inc.

Date of Disbursement

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

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

City Washington State DC Zip Code 20003

Purpose of Disbursement
Offset for independent expenditure paid in prior period; disseminated in
Current period
Candidate Name

24A

Category/
Type**Transaction ID : EXPB25**

Amount of Each Disbursement this Period

-55000.00

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

State: District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

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

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

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

State: District:

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

-55000.00

39019.31

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

NextGen Committee

A. Adams , Thomas

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

7500.00

B. American Values Network

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

29000.00

C.

category/
Type

Disbursement For:

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

36500.00

36500.00

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

Form/Schedule: SB29

Transaction ID : EXPB35

Payment for independent expenditure disseminated in prior period

Form/Schedule:

Transaction ID:

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

PAGE 19 OF 62

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

NAME OF COMMITTEE (In Full)

NextGen Committee

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

Adams , Thomas

Nature of Debt (Purpose):
Consulting Services

Mailing Address 176 Valdeflores Drive

City State

Zip Code

Burlingame

CA

94010

Outstanding Balance Beginning This Period

7500.00

Transaction ID : PAYD17

Amount Incurred This Period

0.00

Payment This Period

7500.00

Outstanding Balance at Close of This Period

0.00

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

Barnes Mosher Whitehurst Lauter & Partners, Inc.

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

City State

Zip Code

San Francisco

CA

94105

Outstanding Balance Beginning This Period

6250.00

Transaction ID : PAYD33

Amount Incurred This Period

0.00

Payment This Period

6250.00

Outstanding Balance at Close of This Period

0.00

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

Barnes Mosher Whitehurst Lauter & Partners, Inc.

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

City

State

Zip Code

San Francisco

CA

94105

Outstanding Balance Beginning This Period

3125.00

Transaction ID : PAYD145

Amount Incurred This Period

0.00

Payment This Period

3125.00

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 20 OF 62

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

NAME OF COMMITTEE (In Full)

NextGen Committee

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

Benenson Strategy Group

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

City	State	Zip Code
Denver	CO	80246

Outstanding Balance Beginning This Period

27150.00

Transaction ID : PAYD31

Amount Incurred This Period

0.00

Payment This Period

27150.00

Outstanding Balance at Close of This Period

0.00

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

Benenson Strategy Group

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

City	State	Zip Code
Denver	CO	80246

Outstanding Balance Beginning This Period

9092.29

Transaction ID : PAYD139

Amount Incurred This Period

0.00

Payment This Period

9092.29

Outstanding Balance at Close of This Period

0.00

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

Benenson Strategy Group

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

City	State	Zip Code
Denver	CO	80246

Outstanding Balance Beginning This Period

31615.00

Transaction ID : PAYD140

Amount Incurred This Period

0.00

Payment This Period

31615.00

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 21 OF 62

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

NAME OF COMMITTEE (In Full)

NextGen Committee

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

Campaign Industries, LLC

Nature of Debt (Purpose):

Consulting Services; 3/22 - 4/24

Mailing Address 1501 Dempster Street

City State

Zip Code

Evanston

IL

60201

Outstanding Balance Beginning This Period

15000.00

Transaction ID : PAYD127

Amount Incurred This Period

0.00

Payment This Period

15000.00

Outstanding Balance at Close of This Period

0.00

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

Campaign Industries, LLC

Nature of Debt (Purpose):

Poster production for press event

Mailing Address 1501 Dempster Street

City State

Zip Code

Evanston

IL

60201

Outstanding Balance Beginning This Period

45.15

Transaction ID : PAYD128

Amount Incurred This Period

0.00

Payment This Period

45.15

Outstanding Balance at Close of This Period

0.00

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

Campaign Industries, LLC

Nature of Debt (Purpose):

Shipping

Mailing Address 1501 Dempster Street

City

State

Zip Code

Evanston

IL

60201

Outstanding Balance Beginning This Period

194.46

Transaction ID : PAYD129

Amount Incurred This Period

0.00

Payment This Period

194.46

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 22 OF 62

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

NAME OF COMMITTEE (In Full)

NextGen Committee

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

Campaign Industries, LLC

Nature of Debt (Purpose):

Travel Expenses

Mailing Address 1501 Dempster Street

City State

Zip Code

Evanston

IL

60201

Outstanding Balance Beginning This Period

141.20

Transaction ID : PAYD130

Amount Incurred This Period

0.00

Payment This Period

141.20

Outstanding Balance at Close of This Period

0.00

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

DGA Productions

Nature of Debt (Purpose):

Camera Rental for Press Conference

Mailing Address 50 Hunt Street

City State

Zip Code

Watertown

MA

02472

Outstanding Balance Beginning This Period

1351.13

Transaction ID : PAYD34

Amount Incurred This Period

0.00

Payment This Period

1351.13

Outstanding Balance at Close of This Period

0.00

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

HSC, Inc.

Nature of Debt (Purpose):

Campaign Research (estimate)

Mailing Address 360 Grand Avenue, Suite 138

City

State

Zip Code

Oakland

CA

94610

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD116

Amount Incurred This Period

20000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20000.00

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

20000.00

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

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

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

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

PAGE 23 OF 62

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

NAME OF COMMITTEE (In Full)

NextGen Committee

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

Lehane, Erin

Nature of Debt (Purpose):

Press Consulting

Mailing Address 2247 Clay Street

City State

Zip Code

San Francisco

CA

94115

Outstanding Balance Beginning This Period

2500.00

Transaction ID : PAYD172

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

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

Lehane, Erin

Nature of Debt (Purpose):

Travel Expenses

Mailing Address 2247 Clay Street

City State

Zip Code

San Francisco

CA

94115

Outstanding Balance Beginning This Period

1860.00

Transaction ID : PAYD173

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1860.00

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

Lehane, Erin

Nature of Debt (Purpose):

Press Consulting

Mailing Address 2247 Clay Street

City

State

Zip Code

San Francisco

CA

94115

Outstanding Balance Beginning This Period

2500.00

Transaction ID : PAYD174

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

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

6860.00

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

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

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

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

PAGE 24 OF 62

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

NAME OF COMMITTEE (In Full)

NextGen Committee

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

Lehane, Erin

Nature of Debt (Purpose):

Travel Expenses

Mailing Address 2247 Clay Street

City State

Zip Code

San Francisco

CA

94115

Outstanding Balance Beginning This Period

492.00

Transaction ID : PAYD175

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

492.00

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

Mark Fabiani, LLC

Nature of Debt (Purpose):

Consulting Services

Mailing Address 939 Coast Blvd., Suite 4D

City State

Zip Code

La Jolla

CA

92037

Outstanding Balance Beginning This Period

12500.00

Transaction ID : PAYD46

Amount Incurred This Period

0.00

Payment This Period

12500.00

Outstanding Balance at Close of This Period

0.00

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

Markham Group, LLC

Nature of Debt (Purpose):

Consulting Services

Mailing Address 1000 West 3rd Street

City

State

Zip Code

Little Rock

AR

72201

Outstanding Balance Beginning This Period

38100.00

Transaction ID : PAYD15

Amount Incurred This Period

0.00

Payment This Period

38100.00

Outstanding Balance at Close of This Period

0.00

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

492.00

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 25 OF 62

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

NAME OF COMMITTEE (In Full)

NextGen Committee

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

Markham Group, LLC

Nature of Debt (Purpose):

Lawn sign creation & distribution

Mailing Address 1000 West 3rd Street

City State

Zip Code

Little Rock

AR

72201

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD113

Amount Incurred This Period

60000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

60000.00

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

Sadler Strategic Media, Inc.

Nature of Debt (Purpose):

Aerial Banners & Production

Mailing Address 12103 Viewcrest Road

City State

Zip Code

Studio City

CA

91604

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD159

Amount Incurred This Period

40200.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

40200.00

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

Social Stream Media

Nature of Debt (Purpose):

Banner ads and website production

Mailing Address 268 Bush Street, #3335

City

State

Zip Code

San Francisco

CA

94104

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD114

Amount Incurred This Period

20500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20500.00

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

120700.00

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 26 OF 62

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

NAME OF COMMITTEE (In Full)

NextGen Committee

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

Tigercomm

Nature of Debt (Purpose):

Consulting Services; 3/1 - 3/31

Mailing Address 1901 N. Fort Myer Drive, Suite 850

City State

Zip Code

Arlington

VA

22209

Outstanding Balance Beginning This Period

32000.00

Transaction ID : PAYD148

Amount Incurred This Period

0.00

Payment This Period

32000.00

Outstanding Balance at Close of This Period

0.00

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

Tigercomm

Nature of Debt (Purpose):

Consulting Services; 4/1 - 4/30

Mailing Address 1901 N. Fort Myer Drive, Suite 850

City State

Zip Code

Arlington

VA

22209

Outstanding Balance Beginning This Period

20800.00

Transaction ID : PAYD151

Amount Incurred This Period

0.00

Payment This Period

20800.00

Outstanding Balance at Close of This Period

0.00

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

Tigercomm

Nature of Debt (Purpose):

Travel Expenses

Mailing Address 1901 N. Fort Myer Drive, Suite 850

City State

Zip Code

Arlington

VA

22209

Outstanding Balance Beginning This Period

2247.83

Transaction ID : PAYD152

Amount Incurred This Period

0.00

Payment This Period

2247.83

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 27 OF 62

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

NAME OF COMMITTEE (In Full)

NextGen Committee

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

Tigercomm

Nature of Debt (Purpose):
Consulting

Mailing Address 1901 N. Fort Myer Drive, Suite 850

City State

Zip Code

Arlington

VA

22209

Outstanding Balance Beginning This Period

3200.00

Transaction ID : PAYD163

Amount Incurred This Period

0.00

Payment This Period

3200.00

Outstanding Balance at Close of This Period

0.00

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

Tigercomm

Nature of Debt (Purpose):

Consulting Services; 4/1 - 4/30

Mailing Address 1901 N. Fort Myer Drive, Suite 850

City State

Zip Code

Arlington

VA

22209

Outstanding Balance Beginning This Period

8000.00

Transaction ID : PAYD178

Amount Incurred This Period

0.00

Payment This Period

8000.00

Outstanding Balance at Close of This Period

0.00

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

Tigercomm

Nature of Debt (Purpose):

Consulting

Mailing Address 1901 N. Fort Myer Drive, Suite 850

City State

Zip Code

Arlington

VA

22209

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD107

Amount Incurred This Period

6552.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6552.00

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

6552.00

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 28 OF 62

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

NAME OF COMMITTEE (In Full)

NextGen Committee

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

Tigercomm

Nature of Debt (Purpose):

Consulting for Press Announcement

Mailing Address 1901 N. Fort Myer Drive, Suite 850

City State

Zip Code

Arlington

VA

22209

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD176

Amount Incurred This Period

10700.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10700.00

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

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

10700.00

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

165304.00

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

0.00

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

165304.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 29 OF 62
 FOR LINE 24 OF FORM 3X

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

Full Name (Last, First, Middle Initial) of Payee Adams , Thomas		Date MM / DD / YYYY 04 / 16 / 2013	
Mailing Address 176 Valdeflores Drive		Amount 7500.00	
City Burlingame	State CA		
Purpose of Expenditure Consulting Services	Category/ Type 24A	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 435914.32		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) _____ Special 2013	

Full Name (Last, First, Middle Initial) of Payee Adams , Thomas		Date MM / DD / YYYY 04 / 21 / 2013	
Mailing Address 176 Valdeflores Drive		Amount 7500.00	
City Burlingame	State CA		
Purpose of Expenditure Consulting Services	Category/ Type 24A	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 435914.32		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) _____ Special 2013	

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

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

Thomas F. Steyer

[Electronically Filed]

Signature

Date 06 / 14 / 2013

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

Form/Schedule: SE
Transaction ID : PDTE8

Payment for independent expenditure disseminated in prior period

Form/Schedule:
Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 31 OF 62
 FOR LINE 24 OF FORM 3X

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

Full Name (Last, First, Middle Initial) of Payee Adams , Thomas		Date <div style="border: 1px solid black; padding: 2px;"> 06 / 01 / 2013 </div>	
Mailing Address 176 Valdeflores Drive		Amount <div style="border: 1px solid black; padding: 2px;"> 1500.00 </div>	
City Burlingame	State CA		
Purpose of Expenditure Consulting	Category/ Type <div style="border: 1px solid black; padding: 2px;"> 24A </div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:	
Name of Federal Candidate Supported or Opposed by Expenditure: Gabriel Gomez		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> 338785.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) 2013 Runoff	

Transaction ID : EDTEALC23

Full Name (Last, First, Middle Initial) of Payee Barnes Mosher Whitehurst Lauter & Partners, Inc.		Date <div style="border: 1px solid black; padding: 2px;"> 04 / 16 / 2013 </div>	
Mailing Address 660 Mission St., 2nd Floor, Ste 200		Amount <div style="border: 1px solid black; padding: 2px;"> 6250.00 </div>	
City San Francisco	State CA		
Purpose of Expenditure Consulting Services	Category/ Type <div style="border: 1px solid black; padding: 2px;"> 24A </div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:	
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> 435914.32 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	

Transaction ID : PDTE51

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 7750.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 7750.00 </div>

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

Thomas F. Steyer

Signature

[Electronically Filed]

Date

06 / 14 / 2013

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

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

Form/Schedule:
Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 33 OF 62
 FOR LINE 24 OF FORM 3X

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

Full Name (Last, First, Middle Initial) of Payee Barnes Mosher Whitehurst Lauter & Partners, Inc.		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 04 / 16 / 2013 </div>
Mailing Address 660 Mission St., 2nd Floor, Ste 200		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 3125.00 </div>
City State Zip Code San Francisco CA 94105	Transaction ID : EDTEALC32	
Purpose of Expenditure Consulting Services	Category/ Type 24A	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 435914.32 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013

Full Name (Last, First, Middle Initial) of Payee Barnes Mosher Whitehurst Lauter & Partners, Inc.		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 05 / 21 / 2013 </div>
Mailing Address 660 Mission St., 2nd Floor, Ste 200		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 3125.00 </div>
City State Zip Code San Francisco CA 94105	Transaction ID : PDTE27	
Purpose of Expenditure Consulting Services	Category/ Type 24A	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 435914.32 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 6250.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 6250.00 </div>

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

Thomas F. Steyer

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y
 06 / 14 / 2013

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Form/Schedule: SE
Transaction ID : EDTEALC32

Payment for independent expenditure disseminated in prior period

Form/Schedule:
Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 35 OF 62
 FOR LINE 24 OF FORM 3X

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

Full Name (Last, First, Middle Initial) of Payee Barnes Mosher Whitehurst Lauter & Partners, Inc.		Date <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY </div>
Mailing Address 660 Mission St., 2nd Floor, Ste 200		Amount <div style="border: 1px solid black; padding: 2px;"> 6250.00 </div>
City State Zip Code San Francisco CA 94105		
Purpose of Expenditure Consulting	Category/ Type 24A	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Gabriel Gomez		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 338785.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) 2013 Runoff

Transaction ID : EDTEALC24

Full Name (Last, First, Middle Initial) of Payee Campaign Industries, LLC		Date <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY </div>
Mailing Address 1501 Dempster Street		Amount <div style="border: 1px solid black; padding: 2px;"> 194.46 </div>
City State Zip Code Evanston IL 60201		
Purpose of Expenditure Shipping	Category/ Type 24A	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 435914.32		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013

Transaction ID : PDTE23

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 6444.46 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

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

Thomas F. Steyer

[Electronically Filed]

Date

Signature

MM / DD / YYYY

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

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

Form/Schedule: SE
Transaction ID: PDTE23

Payment for independent expenditure disseminated in prior period

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 37 OF 62
 FOR LINE 24 OF FORM 3X

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

Full Name (Last, First, Middle Initial) of Payee Campaign Industries, LLC			Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1501 Dempster Street			Amount <div style="border: 1px solid black; padding: 2px;"> 15000.00 </div>	
City Evanston	State IL	Zip Code 60201	Transaction ID : PDTE24	
Purpose of Expenditure Consulting Services; 3/22 - 4/24		Category/ Type 24A	Office Sought: <input type="checkbox"/> House State: <u>MA</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 435914.32			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	

Full Name (Last, First, Middle Initial) of Payee Campaign Industries, LLC			Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1501 Dempster Street			Amount <div style="border: 1px solid black; padding: 2px;"> 45.15 </div>	
City Evanston	State IL	Zip Code 60201	Transaction ID : PDTE25	
Purpose of Expenditure Poster production for press event		Category/ Type 24A	Office Sought: <input type="checkbox"/> House State: <u>MA</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 435914.32			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 15045.15 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

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

Thomas F. Steyer

Signature

[Electronically Filed]

Date

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

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Form/Schedule: SE
Transaction ID : PDTE24

Payment for independent expenditure disseminated in prior period

Form/Schedule: SE
Transaction ID: PDTE25

Payment for independent expenditure disseminated in prior period

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 39 OF 62
 FOR LINE 24 OF FORM 3X

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

Full Name (Last, First, Middle Initial) of Payee Campaign Industries, LLC		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 05 / 24 / 2013 </div>
Mailing Address 1501 Dempster Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 141.20 </div>
City Evanston	State IL	
Purpose of Expenditure Travel Expenses	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 24A </div>	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 435914.32 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) ▶ Special 2013

Full Name (Last, First, Middle Initial) of Payee Campaign Industries, LLC		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 06 / 04 / 2013 </div>
Mailing Address 1501 Dempster Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 80867.50 </div>
City Evanston	State IL	
Purpose of Expenditure Field program for GOTV	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 24E </div>	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Edward Markey		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 338785.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) ▶ 2013 Runoff

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 81008.70 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> _____ </div>

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

Thomas F. Steyer

Signature

[Electronically Filed]

Date

06 / 14 / 2013

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
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Form/Schedule: SE
Transaction ID : PDTE26

Payment for independent expenditure disseminated in prior period

Form/Schedule:
Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 41 OF 62
 FOR LINE 24 OF FORM 3X

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

Full Name (Last, First, Middle Initial) of Payee HSC, Inc.		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 04 / 16 / 2013 </div>
Mailing Address 360 Grand Avenue, Suite 138		Amount <div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y Y Y 11501.51 </div>
City State Zip Code Oakland CA 94610	Transaction ID : EDTEALC31	
Purpose of Expenditure Campaign Research & Expenses	Category/Type 24A	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought Y Y Y Y Y Y Y Y 435914.32		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013

Full Name (Last, First, Middle Initial) of Payee Lehane, Erin [MEMO ITEM]		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 04 / 17 / 2013 </div>
Mailing Address 2247 Clay Street		Amount <div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y Y Y 2500.00 </div>
City State Zip Code San Francisco CA 94115	Transaction ID : PDTE49	
Purpose of Expenditure Press Consulting	Category/Type 24A	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought Y Y Y Y Y Y Y Y 435914.32		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y Y Y 11501.51 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y Y Y </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y Y Y </div>

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

Thomas F. Steyer

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 06 / 14 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 42 OF 62
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00542779</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y Y Y</div>			
Full Name (Last, First, Middle Initial) of Payee Lehane, Erin [MEMO ITEM]		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y Y Y</div> 04 / 17 / 2013	
Mailing Address 2247 Clay Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">492.00</div>	
City San Francisco	State CA	Zip Code 94115	Transaction ID : PDTE50
Purpose of Expenditure Travel Expenses	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>		Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">435914.32</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) ▶ Special 2013	
Full Name (Last, First, Middle Initial) of Payee Mark Fabiani, LLC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y Y Y</div> 04 / 16 / 2013	
Mailing Address 939 Coast Blvd., Suite 4D		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">12500.00</div>	
City La Jolla	State CA	Zip Code 92037	Transaction ID : EDTEALC22
Purpose of Expenditure Consulting Services	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>		Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">435914.32</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) ▶ Special 2013	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		<div style="border: 1px solid black; padding: 2px; display: inline-block;">12500.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures..... ▶		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Thomas F. Steyer <div style="display: flex; justify-content: space-between;"><div>Signature</div><div>[Electronically Filed]</div><div>Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y Y Y</div> 06 / 14 / 2013</div></div>			

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 43 OF 62
 FOR LINE 24 OF FORM 3X

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

Full Name (Last, First, Middle Initial) of Payee Mark Fabiani, LLC		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 05 / 20 / 2013 </div>
Mailing Address 939 Coast Blvd., Suite 4D		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 12500.00 </div>
City La Jolla	State CA	
Purpose of Expenditure Consulting Services	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 24A </div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 435914.32 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) <u>Special 2013</u>

Transaction ID : PDTE52

Full Name (Last, First, Middle Initial) of Payee Mark Fabiani, LLC		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 06 / 01 / 2013 </div>
Mailing Address 939 Coast Blvd., Suite 4D		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 12500.00 </div>
City La Jolla	State CA	
Purpose of Expenditure Consulting	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 24A </div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Gabriel Gomez		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 338785.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) <u>2013 Runoff</u>

Transaction ID : EDTEALC25

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 25000.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 25000.00 </div>

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

Thomas F. Steyer

Signature

[Electronically Filed]

Date

06 / 14 / 2013

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Form/Schedule: SE
Transaction ID : EDTEALC25

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

Form/Schedule:
Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 45 OF 62
 FOR LINE 24 OF FORM 3X

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

Full Name (Last, First, Middle Initial) of Payee Markham Group, LLC		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 04 / 16 / 2013 </div>
Mailing Address 1000 West 3rd Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 38100.00 </div>
City Little Rock	State AR	
Purpose of Expenditure Consulting Services	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 24A </div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 435914.32 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) <u>Special 2013</u>

Transaction ID : PDTE7

Full Name (Last, First, Middle Initial) of Payee Portal A Limited		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 05 / 28 / 2013 </div>
Mailing Address 520 Waller Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 33000.00 </div>
City San Francisco	State CA	
Purpose of Expenditure Video Production	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 24A </div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Gabriel Gomez		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 338785.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) <u>2013 Runoff</u>

Transaction ID : EDTEALC9

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 71100.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 71100.00 </div>

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

Thomas F. Steyer

Signature

[Electronically Filed]

Date

06 / 14 / 2013

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
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Form/Schedule: SE
Transaction ID : PDTE7

Payment for independent expenditure disseminated in prior period

Form/Schedule:
Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 47 OF 62
 FOR LINE 24 OF FORM 3X

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

Full Name (Last, First, Middle Initial) of Payee Portal A Limited		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 06 / 01 / 2013 </div>
Mailing Address 520 Waller Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 10000.00 </div>
City San Francisco	State CA	
Purpose of Expenditure YouTube Video	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 24A </div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Gabriel Gomez		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 338785.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) 2013 Runoff

Transaction ID : PDTE16

Full Name (Last, First, Middle Initial) of Payee Printing Unlimited		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 06 / 04 / 2013 </div>
Mailing Address 63 Plymouth Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 5907.50 </div>
City Holbrook	State MA	
Purpose of Expenditure GOTV flyers	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 24E </div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Edward Markey		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 338785.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) 2013 Runoff

Transaction ID : EDTEALC21

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 15907.50 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 15907.50 </div>

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

Thomas F. Steyer

[Electronically Filed]

Signature

Date

06 / 14 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 48 OF 62
 FOR LINE 24 OF FORM 3X

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

Full Name (Last, First, Middle Initial) of Payee Sadler Strategic Media, Inc.		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 12103 Viewcrest Road		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 49700.00 </div>
City State Zip Code Studio City CA 91604	Transaction ID : EDTEALC6	
Purpose of Expenditure Aerial Banners	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 435914.32 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013

Full Name (Last, First, Middle Initial) of Payee Sadler Strategic Media, Inc.		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 12103 Viewcrest Road		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 153000.00 </div>
City State Zip Code Studio City CA 91604	Transaction ID : EDTEALC10	
Purpose of Expenditure Pandora Ads	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Gabriel Gomez		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 338785.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) 2013 Runoff

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 202700.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

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

Thomas F. Steyer

[Electronically Filed]

Date

Signature

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

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 49 OF 62
 FOR LINE 24 OF FORM 3X

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

Full Name (Last, First, Middle Initial) of Payee Social Stream Media		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 05 / 28 / 2013 </div>
Mailing Address 268 Bush Street, #3335		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 25000.00 </div>
City San Francisco	State CA	
Purpose of Expenditure Facebook Ads	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 24A </div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Gabriel Gomez		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 338785.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) 2013 Runoff

Transaction ID : PDTE15

Full Name (Last, First, Middle Initial) of Payee Tigercomm		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 05 / 21 / 2013 </div>
Mailing Address 1901 N. Fort Myer Drive, Suite 850		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 4800.00 </div>
City Arlington	State VA	
Purpose of Expenditure Design & Pitching for Video Mobile Billboards	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 24A </div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 435914.32 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013

Transaction ID : PDTE33

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 29800.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 29800.00 </div>

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

Thomas F. Steyer

Signature

[Electronically Filed]

Date

06 / 14 / 2013

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Form/Schedule: SE
Transaction ID : PDTE33

Payment for independent expenditure disseminated in prior period

Form/Schedule:
Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 51 OF 62
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee		FEC IDENTIFICATION NUMBER ▼ C C00542779	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name (Last, First, Middle Initial) of Payee Tigercomm		Date M M M / D D D / Y Y Y Y Y Y 05 / 21 / 2013	
Mailing Address 1901 N. Fort Myer Drive, Suite 850		Amount 8000.00	
City Arlington	State VA	Zip Code 22209	Transaction ID : PDTE34
Purpose of Expenditure Aerial banners design & pitch		Category/ Type 24A	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 435914.32		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	
Full Name (Last, First, Middle Initial) of Payee Tigercomm		Date M M M / D D D / Y Y Y Y Y Y 05 / 21 / 2013	
Mailing Address 1901 N. Fort Myer Drive, Suite 850		Amount 1600.00	
City Arlington	State VA	Zip Code 22209	Transaction ID : PDTE35
Purpose of Expenditure Consulting for Blog Piece		Category/ Type 24A	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 435914.32		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	
(a) SUBTOTAL of Itemized Independent Expenditures.....		9600.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures.....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Thomas F. Steyer		[Electronically Filed]	
Signature		Date 06 / 14 / 2013	

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
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Form/Schedule: SE
Transaction ID : PDTE34

Payment for independent expenditure disseminated in prior period

Form/Schedule: SE
Transaction ID: PDTE35

Payment for independent expenditure disseminated in prior period

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 53 OF 62
 FOR LINE 24 OF FORM 3X

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

Full Name (Last, First, Middle Initial) of Payee Tigercomm		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">DD</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">YYYYYY</div> 05 / 21 / 2013	
Mailing Address 1901 N. Fort Myer Drive, Suite 850		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1600.00</div>	
City Arlington	State VA	Zip Code 22209	Transaction ID : PDTE36 Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Purpose of Expenditure Consulting for Blog Piece			
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>			
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">435914.32</div>			

Full Name (Last, First, Middle Initial) of Payee Tigercomm		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">DD</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">YYYYYY</div> 05 / 21 / 2013	
Mailing Address 1901 N. Fort Myer Drive, Suite 850		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">8000.00</div>	
City Arlington	State VA	Zip Code 22209	Transaction ID : PDTE38 Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Purpose of Expenditure Kick-off press conference			
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>			
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">435914.32</div>			

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">9600.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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

Thomas F. Steyer

[Electronically Filed]

Date

MM

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YYYYYY

 06 / 14 / 2013

Signature

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Form/Schedule: SE
Transaction ID : PDTE36

Payment for independent expenditure disseminated in prior period

Form/Schedule: SE
Transaction ID: PDTE38

Payment for independent expenditure disseminated in prior period

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 55 OF 62
FOR LINE 24 OF FORM 3X

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

Full Name (Last, First, Middle Initial) of Payee Tigercomm		Date M M M / D D D / Y Y Y Y Y Y 05 / 21 / 2013	
Mailing Address 1901 N. Fort Myer Drive, Suite 850		Amount 4800.00	
City Arlington	State VA	Zip Code 22209	Transaction ID : PDTE39
Purpose of Expenditure High Noon Letter	Category/ Type 24A	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	State: MA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	
Calendar Year-To-Date Per Election for Office Sought 435914.32			

Full Name (Last, First, Middle Initial) of Payee Tigercomm		Date M M M / D D D / Y Y Y Y Y Y 05 / 21 / 2013	
Mailing Address 1901 N. Fort Myer Drive, Suite 850		Amount 3200.00	
City Arlington	State VA	Zip Code 22209	Transaction ID : PDTE40
Purpose of Expenditure Open Letter	Category/ Type 24A	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	State: MA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	
Calendar Year-To-Date Per Election for Office Sought 435914.32			

(a) SUBTOTAL of Itemized Independent Expenditures.....	8000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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

Thomas F. Steyer
Signature

[Electronically Filed]

Date M M M / D D D / Y Y Y Y Y Y
06 / 14 / 2013

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Form/Schedule: SE
Transaction ID : PDTE39

Payment for independent expenditure disseminated in prior period

Form/Schedule: SE
Transaction ID: PDTE40

Payment for independent expenditure disseminated in prior period

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 57 OF 62
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00542779</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>					
Full Name (Last, First, Middle Initial) of Payee Tigercomm			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">05 / 24 / 2013</div>		
Mailing Address 1901 N. Fort Myer Drive, Suite 850			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">8000.00</div>		
City Arlington		State VA	Zip Code 22209		Transaction ID : PDTE63
Purpose of Expenditure Aerial banners design & pitch		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>		Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">435914.32</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) ▶ Special 2013		
Full Name (Last, First, Middle Initial) of Payee Tigercomm			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">05 / 24 / 2013</div>		
Mailing Address 1901 N. Fort Myer Drive, Suite 850			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">8000.00</div>		
City Arlington		State VA	Zip Code 22209		Transaction ID : PDTE37
Purpose of Expenditure Aerial banners design & pitch		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>		Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">435914.32</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) ▶ Special 2013		
<div style="display: flex; justify-content: space-between;"><div style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures.....▶</div><div style="width: 35%; border: 1px solid black; padding: 5px; text-align: right;">16000.00</div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div style="width: 60%;">(b) SUBTOTAL of Unitemized Independent Expenditures▶</div><div style="width: 35%; border: 1px solid black; padding: 5px; text-align: right;"></div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div style="width: 60%;">(c) TOTAL Independent Expenditures.....▶</div><div style="width: 35%; border: 1px solid black; padding: 5px; text-align: right;"></div></div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Thomas F. Steyer					
Signature			[Electronically Filed]		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">06 / 14 / 2013</div>

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
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Form/Schedule: SE
Transaction ID : PDTE37

Payment for independent expenditure disseminated in prior period

Form/Schedule:
Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 59 OF 62
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) NextGen Committee		FEC IDENTIFICATION NUMBER ▼ C C00542779	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name (Last, First, Middle Initial) of Payee Tigercomm		Date M M M / D D D / Y Y Y Y Y Y 05 / 24 / 2013	
Mailing Address 1901 N. Fort Myer Drive, Suite 850		Amount 9600.00	
City Arlington	State VA	Zip Code 22209	Transaction ID : PDTE42
Purpose of Expenditure Production & Pitch Infographic		Category/ Type 24A	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 435914.32		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	
Full Name (Last, First, Middle Initial) of Payee Tigercomm		Date M M M / D D D / Y Y Y Y Y Y 05 / 24 / 2013	
Mailing Address 1901 N. Fort Myer Drive, Suite 850		Amount 3200.00	
City Arlington	State VA	Zip Code 22209	Transaction ID : PDTE43
Purpose of Expenditure Pitch for YouTube Ads		Category/ Type 24A	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 435914.32		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	
(a) SUBTOTAL of Itemized Independent Expenditures.....		12800.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures.....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Thomas F. Steyer		[Electronically Filed]	
Signature		Date 06 / 14 / 2013	

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
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Form/Schedule: SE
Transaction ID : PDTE42

Payment for independent expenditure disseminated in prior period

Form/Schedule: SE
Transaction ID: PDTE43

Payment for independent expenditure disseminated in prior period

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 61 OF 62
 FOR LINE 24 OF FORM 3X

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

Full Name (Last, First, Middle Initial) of Payee Tigercomm [MEMO ITEM]		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">04</div> <div style="border: 1px solid black; padding: 2px;">2013</div> </div>	
Mailing Address 1901 N. Fort Myer Drive, Suite 850		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2200.00</div>	
City Arlington	State VA		
Purpose of Expenditure Consulting & design for GOTV flyer (estimate)		Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">24E</div>	Office Sought: <input type="checkbox"/> House State: <u>MA</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Edward Markey		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">338785.00</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) ▶ 2013 Runoff	

Full Name (Last, First, Middle Initial) of Payee Tigercomm [MEMO ITEM]		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">04</div> <div style="border: 1px solid black; padding: 2px;">2013</div> </div>	
Mailing Address 1901 N. Fort Myer Drive, Suite 850		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">7608.90</div>	
City Arlington	State VA		
Purpose of Expenditure Consulting for Press Announcement		Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">24A</div>	Office Sought: <input type="checkbox"/> House State: <u>MA</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Gabriel Gomez		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">338785.00</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) ▶ 2013 Runoff	

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

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

Thomas F. Steyer

[Electronically Filed]

Date

06

14

2013

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 62 OF 62
 FOR LINE 24 OF FORM 3X

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

Full Name (Last, First, Middle Initial) of Payee Tigercomm [MEMO ITEM]		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 06 / 04 / 2013 </div>	
Mailing Address 1901 N. Fort Myer Drive, Suite 850		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 951.10 </div>	
City Arlington	State VA		
Purpose of Expenditure Consulting for Press Announcement	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 24A </div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:	
Name of Federal Candidate Supported or Opposed by Expenditure: Edward Markey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 338785.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) 2013 Runoff	

Full Name (Last, First, Middle Initial) of Payee Winning Connections, Inc.		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 04 / 16 / 2013 </div>	
Mailing Address 317 Pennsylvania Ave., SE, 2nd Floor		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 55000.00 </div>	
City Washington	State DC		
Purpose of Expenditure Robocalls	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 24A </div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:	
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 435914.32 </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) Special 2013	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 55000.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 611007.32 </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 611007.32 </div>

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

Thomas F. Steyer

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 06 / 14 / 2013

Signature