

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS
For Other Than An Authorized Committee

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1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

C R G T I N C P A C

ADDRESS (number and street) 1 1 9 2 1 F R E E D O M D R I V E

Check if different than previously reported. (ACC) S U I T E 1 0 0 0

R E S T O N V A 2 0 1 9 0

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

C 0 0 4 5 2 2 3 5

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 M M / D D / Y Y Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the:

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

Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y through M M / D D / Y Y Y Y Y Y

0 4 / 0 1 / 2 0 1 4 through 0 6 / 3 0 / 2 0 1 4

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 David Pearson

Signature of Treasurer  Date M M / D D / Y Y Y Y Y Y

0 7 / 1 4 / 2 0 1 4

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

CRGT INC PAC

Report Covering the Period: From:

M	M	
0	4	

 /

D	D	
0	1	

 /

Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
2	0	1	4						

 To:

M	M	
0	6	

 /

D	D	
3	0	

 /

Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
2	0	1	4						

	COLUMN A This Period	COLUMN B Calendar Year-to-Date														
6. (a) Cash on Hand January 1, <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>4</td><td></td><td></td></tr></table>	Y	Y	Y	Y	Y	Y	2	0	1	4			<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">1,478,541</td></tr></table>	1,478,541
Y	Y	Y	Y	Y	Y											
2	0	1	4													
1,478,541																
(b) Cash on Hand at Beginning of Reporting Period.....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">1,467,469</td></tr></table>	1,467,469														
1,467,469																
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="center">-0-</td></tr></table>	-0-	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="center">-0-</td></tr></table>	-0-												
-0-																
-0-																
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">1,467,469</td></tr></table>	1,467,469	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">1,478,541</td></tr></table>	1,478,541												
1,467,469																
1,478,541																
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">145,833</td></tr></table>	145,833	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">256,555</td></tr></table>	256,555												
145,833																
256,555																
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">1,452,886</td></tr></table>	1,452,886	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">1,452,886</td></tr></table>	1,452,886												
1,452,886																
1,452,886																
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="center">-0-</td></tr></table>	-0-														
-0-																
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="center">-0-</td></tr></table>	-0-														
-0-																

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

CRGT INC PAC

Report Covering the Period: From:

MM	DD	YY
04	01	2014

 To:

MM	DD	YY
06	30	2014

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).....	-0-	-0-
(ii) Unitemized.....		
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	-0-	-0-
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	-0-	-0-
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	-0-	-0-
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	-0-	-0-

**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			
(ii) Non-Federal Share.....			
(b) Other Federal Operating Expenditures	14583	25655	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	14583	25655	
22. Transfers to Affiliated/Other Party Committees.....			
23. Contributions to Federal Candidates/Committees and Other Political Committees.....			
24. Independent Expenditures (use Schedule E).....			
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....			
26. Loan Repayments Made.....			
27. Loans Made.....			
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees			
(b) Political Party Committees			
(c) Other Political Committees (such as PACs).....			
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....			
29. Other Disbursements			
30. Federal Election Activity (2 U.S.C. §431(20))			
(a) Allocated Federal Election Activity (from Schedule H6)			
(i) Federal Share			
(ii) "Levin" Share.....			
(b) Federal Election Activity Paid Entirely With Federal Funds			
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	- 0 -	- 0 -	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	14583	25655	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14583	25655	

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)		
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	14583	25655
37. Offsets to Operating Expenditures (from Line 15, page 3).....		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	14583	25655

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

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

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

NAME OF COMMITTEE (In Full)
CRGT INC PAC

A. Full Name (Last, First, Middle Initial) **NONE**

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

Amount of Each Receipt this Period

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

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

Amount of Each Receipt this Period

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

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

Amount of Each Receipt this Period

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

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

FORM 1000-10-01

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE	OF
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b		

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

NAME OF COMMITTEE (In Full)
CRGT INC PAC

Full Name (Last, First, Middle Initial) A.		Date of Disbursement
NONE		<input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address		
City	State	Zip Code
Purpose of Disbursement	<input type="text"/> Category/ Type	Amount of Each Disbursement this Period <input type="text"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: <input type="text"/> District: <input type="text"/>		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
Purpose of Disbursement	<input type="text"/> Category/ Type	Amount of Each Disbursement this Period <input type="text"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: <input type="text"/> District: <input type="text"/>		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
Purpose of Disbursement	<input type="text"/> Category/ Type	Amount of Each Disbursement this Period <input type="text"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: <input type="text"/> District: <input type="text"/>		

SUBTOTAL of Disbursements This Page (optional).....▶	<input type="text"/> - 0 -
TOTAL This Period (last page this line number only).....▶	<input type="text"/> - 0 -

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Federal Election Commission
979 E Street NW
Washington DC 20463

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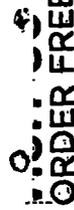
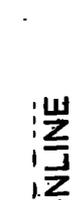
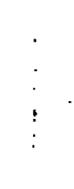
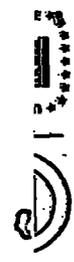
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Date Accepted (MM/DD/YYYY) 07/14/14	Scheduled Delivery Time <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input type="checkbox"/> 12 NOON	Delivery Attempt (MM/DD/YYYY) Time 07/14/14	Employee Signature
Time Accepted 2:47 PM	10:30 AM Delivery Fee \$	Delivery Attempt (MM/DD/YYYY) Time 07/14/14	Employee Signature
Weight 2.80 lbs. ozs.	Insurance Fee \$	Delivery Attempt (MM/DD/YYYY) Time 07/14/14	Employee Signature
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Acceptance Employee Initials [Signature]	Total Postage & Fees \$ 17.99	Delivery Attempt (MM/DD/YYYY) Time 07/14/14	Employee Signature

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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
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<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


PREPARER
(8/2013)

7/15/14
DATE PREPARED