

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Every Voice Action

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1581311.25"/>	<input type="text" value="1581311.25"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="1581311.25"/>	<input type="text" value="1581311.25"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="880826.70"/>	<input type="text" value="880826.70"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="700484.55"/>	<input type="text" value="700484.55"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Every Voice Action

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 09 / 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).....	5000.00	5000.00
(ii) Unitemized	1546.00	1546.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	6546.00	6546.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	6546.00	6546.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1574765.25	1574765.25
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))..... ▶	1581311.25	1581311.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1581311.25	1581311.25

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	158177.41	158177.41
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	158177.41	158177.41
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	446952.00	446952.00
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	275697.29	275697.29
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)) ..	880826.70	880826.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	880826.70	880826.70

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)	6546.00	6546.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6546.00	6546.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	158177.41	158177.41
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	158177.41	158177.41

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

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

FOR LINE NUMBER: PAGE 6 OF 33
(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)
Every Voice Action

A. Ellen Chesler
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 W 72nd St
 City New York State NY Zip Code 10023-3417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Roosevelt Institute Occupation Senior Fellow
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : VN8AJD6GQM0
 Amount of Each Receipt this Period
 5000.00

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
 M M / D D / Y Y Y Y Y Y
 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
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

**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 33
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Every Voice Action

Full Name (Last, First, Middle Initial)
A. Every Voice

Mailing Address 1133 19th St NW
FI 9

City Washington State DC Zip Code 20036-3612

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2014
Transaction ID : VN8AJCYDBA4

Amount of Each Receipt this Period
 10000.00

Full Name (Last, First, Middle Initial)
B. Friends of Democracy IE

Mailing Address PO Box 33691

City Washington State DC Zip Code 20033-0691

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2014
Transaction ID : VN8AJCYSM41

Amount of Each Receipt this Period
 250000.00

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

Mailing Address 1133 19th St NW
FI 9

City Washington State DC Zip Code 20036-3612

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
27000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 07 / 2014
Transaction ID : VN8AJD9G5R0

Amount of Each Receipt this Period
 2000.00

*Payment to vendor-Catalist as an In-kind contribution

SUBTOTAL of Receipts This Page (optional).....▶	262000.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : VN8AJD9G5R0

see transaction VN7BA9WS0F6

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)	PAGE 9 OF 33
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Every Voice Action

Full Name (Last, First, Middle Initial) A. Every Voice		Date of Receipt MM / DD / YYYY 08 / 07 / 2014 Transaction ID : VN8AJD9GMQ4
Mailing Address 1133 19th St NW FI 9		Amount of Each Receipt this Period 15000.00
City Washington	State DC	Zip Code 20036-3612
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 27000.00	
		*Payment to vendor-Luis Navarro as an In-kind contribution

Full Name (Last, First, Middle Initial) B. Every Voice		Date of Receipt MM / DD / YYYY 08 / 18 / 2014 Transaction ID : VN8AJD32463
Mailing Address 1133 19th St NW FI 9		Amount of Each Receipt this Period 30000.00
City Washington	State DC	Zip Code 20036-3612
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 57000.00	
		Payment to vendor-New Partners as an In-kind contribution

Full Name (Last, First, Middle Initial) C. Every Voice		Date of Receipt MM / DD / YYYY 09 / 05 / 2014 Transaction ID : VN8AJD9G6V5
Mailing Address 1133 19th St NW FI 9		Amount of Each Receipt this Period 6483.87
City Washington	State DC	Zip Code 20036-3612
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 63483.87	
		*Payment to Anthony Whittaker as an In-kind contribution

SUBTOTAL of Receipts This Page (optional).....▶	51483.87
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : VN8AJD9GMQ4

see transaction VN7BA9WRZY3

Form/Schedule: SA17

Transaction ID: VN8AJD32463

see Transaction # VNBA9VAA27

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : VN8AJD9G6V5

see transaction VN7BA9WS0A8

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)	PAGE 12 OF 33
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Every Voice Action

Full Name (Last, First, Middle Initial)
A. Friends of Democracy IE

Mailing Address PO Box 33691

City Washington State DC Zip Code 20033-0691

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2014
Transaction ID : VN8AJD348X9

Amount of Each Receipt this Period
500000.00

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

Mailing Address PO Box 380444

City Cambridge State MA Zip Code 02238-0444

FEC ID number of contributing federal political committee. **C** C00562587

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
14000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2014
Transaction ID : VN8AJD32267

Amount of Each Receipt this Period
14000.00

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

Mailing Address 1133 19th St NW
FI 9

City Washington State DC Zip Code 20036-3612

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
98483.87

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2014
Transaction ID : VN8AJD31SJ3

Amount of Each Receipt this Period
35000.00

*Payment to vendor-New Partners as an In-kind contribution

SUBTOTAL of Receipts This Page (optional).....▶	549000.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : VN8AJD31SJ3

see transaction # VN7BA9VA4Z1

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)	PAGE 14 OF 33
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Every Voice Action

A. Every Voice
Full Name (Last, First, Middle Initial)
Mailing Address 1133 19th St NW
FI 9
City Washington State DC Zip Code 20036-3612
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2014
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
113483.87

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 10 / 2014
Transaction ID : VN8AJD9GMW4
Amount of Each Receipt this Period
15000.00
*Payment to vendor-Luis Navarro as an In-kind contribution

B. HOUSE MAJORITY PAC
Full Name (Last, First, Middle Initial)
Mailing Address 700 13th St NW
Ste 600
City Washington State DC Zip Code 20005-3960
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2014
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
4760.75

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2014
Transaction ID : VN8AJD68XF1
Amount of Each Receipt this Period
4760.75
* In-Kind: *In-kind: Public Opinion Research

C. Every Voice
Full Name (Last, First, Middle Initial)
Mailing Address 1133 19th St NW
FI 9
City Washington State DC Zip Code 20036-3612
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2014
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
126765.12

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014
Transaction ID : VN8AJD9G687
Amount of Each Receipt this Period
13281.25
*Payment to vendor-Catalist as an In-kind contribution

SUBTOTAL of Receipts This Page (optional).....	33042.00
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : VN8AJD9GMW4

see transaction VN7BA9WRZZ1

Form/Schedule: SA17

Transaction ID: VN8AJD9G687

see transaction VN7BA9WS0H1

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 33
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Every Voice Action

Full Name (Last, First, Middle Initial)
A. Friends of Democracy IE

Mailing Address PO Box 33691

City Washington State DC Zip Code 20033-0691

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2014
Transaction ID : VN8AJD4PKP9

Amount of Each Receipt this Period
400000.00

Full Name (Last, First, Middle Initial)
B. HOUSE MAJORITY PAC

Mailing Address 700 13th St NW Ste 600

City Washington State DC Zip Code 20005-3960

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11427.42

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : VN8AJD8C4K5

Amount of Each Receipt this Period
6666.67

* In-Kind: *In-kind: Public Opinion Research

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

Mailing Address 1133 19th St NW Fl 9

City Washington State DC Zip Code 20036-3612

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
132765.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2014
Transaction ID : VN8AJD9GPY2

Amount of Each Receipt this Period
6000.00

*Payment to Anthony Whittaker as an In-kind contribution

SUBTOTAL of Receipts This Page (optional).....	412666.67
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : VN8AJD9GPY2

see transaction VN7BA9WS0B6

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)	PAGE 18 OF 33
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Every Voice Action

Full Name (Last, First, Middle Initial) A. Vin Ryan		Date of Receipt
Mailing Address 745 Atlantic Ave FI 11		<input type="text"/> M M M / <input type="text"/> D D D / <input type="text"/> Y Y Y Y Y Y
City Boston State MA Zip Code 02111-2709		Transaction ID : VN8AJD5KHR1
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer CEO Occupation Schooner Capital		<input type="text"/> 14000.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text"/> 14000.00

Full Name (Last, First, Middle Initial) B. Ian Simmons		Date of Receipt
Mailing Address 321 N Clark St Ste 2350		<input type="text"/> M M M / <input type="text"/> D D D / <input type="text"/> Y Y Y Y Y Y
City Chicago State IL Zip Code 60654-4784		Transaction ID : VN8AJD7JGM3
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer Blue Haven Initiative Occupation Co-Founder		<input type="text"/> 5786.71
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text"/> 5786.71

Event Costs-donated to this organization see VN7BA9WS9H2

Full Name (Last, First, Middle Initial) C. Robert Bowditch		Date of Receipt
Mailing Address 23 Cushing Rd		<input type="text"/> M M M / <input type="text"/> D D D / <input type="text"/> Y Y Y Y Y Y
City Brookline State MA Zip Code 02445-7553		Transaction ID : VN8AJD6X845
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer n/a Occupation Retired		<input type="text"/> 25000.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text"/> 25000.00

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text"/> 44786.71
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 33
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Every Voice Action

A. David DesJardins
Full Name (Last, First, Middle Initial)

Mailing Address 1538 Burlingame Ave

City Burlingame State CA Zip Code 94010-5102

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

Name of Employer self Occupation investor

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : VN8AJD6GJG9

Amount of Each Receipt this Period
 50000.00

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

Mailing Address 1133 19th St NW
FI 9

City Washington State DC Zip Code 20036-3612

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
179551.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : VN8AJD9FDX7

Amount of Each Receipt this Period
 46786.00

* In-Kind: in-kind staff time & associated overhead

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

Mailing Address 19 Menlo Pl

City Rochester State NY Zip Code 14620-2717

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : VN8AJD6XKG2

Amount of Each Receipt this Period
 25000.00

SUBTOTAL of Receipts This Page (optional).....▶	121786.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : VN8AJD9FDX7

see transaction VN8AJD9FDX71

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 21 OF 33
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Every Voice Action

A. Arnold Hiatt
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 Atlantic Ave
 City Boston State MA Zip Code 02110-3331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer A.M. Fund Occupation President
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 100000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : VN8AJD89T08
 Amount of Each Receipt this Period
 100000.00

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
 M M / D D / Y Y Y Y Y Y
 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
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	100000.00
TOTAL This Period (last page this line number only).....▶	1574765.25

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Every Voice Action

Full Name (Last, First, Middle Initial)

A. Catalist

Mailing Address 1090 Vermont Ave NW
Ste 300

City Washington State DC Zip Code 20005-4966

Purpose of Disbursement
voter file

Candidate Name

005
Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VN7BA9WS0F6

Amount of Each Disbursement this Period

pd by Every Voice as an in-kind contribution see
VN8AJD9G5R0

Full Name (Last, First, Middle Initial)

B. Gerstein, Bocian, Agne Strategies

Mailing Address 1901 L St NW
Ste 702

City Washington State DC Zip Code 20036-3511

Purpose of Disbursement
Polling

Candidate Name

005
Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VN7BA9TTS30

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Harmon, Curran, Speilberg + Eisenberg LLP

Mailing Address 1726 M St NW
Ste 600

City Washington State DC Zip Code 20036-4523

Purpose of Disbursement
Legal Fees

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VN7BA9V1CW4

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Every Voice Action

Full Name (Last, First, Middle Initial)

A. Greenberg Quinlan Rosner Research

Mailing Address 10 G St NE
Ste 50

City Washington State DC Zip Code 20002-4213

Purpose of Disbursement
Polling

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VN7BA9V7XN1

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Salsa Labs Inc

Mailing Address PO Box 674533

City Detroit State MI Zip Code 48267-4533

Purpose of Disbursement
Database Management

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VN7BA9VBGX8

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Gerstein, Bocian, Agne Strategies

Mailing Address 1901 L St NW
Ste 702

City Washington State DC Zip Code 20036-3511

Purpose of Disbursement
Polling

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VN7BA9VF3E7

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Every Voice Action

Full Name (Last, First, Middle Initial)

A. Catalist

Mailing Address 1090 Vermont Ave NW
Ste 300

City Washington State DC Zip Code 20005-4966

Purpose of Disbursement
voter file

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

005
Category/
Type

Date of Disbursement

/ /

Transaction ID : VN7BA9WS0H1

Amount of Each Disbursement this Period

pd by Every Voice as an in-kind contribution see VN8AJD9G687

Full Name (Last, First, Middle Initial)

B. Ian Simmons

Mailing Address 321 N Clark St
Ste 2350

City Chicago State IL Zip Code 60654-4784

Purpose of Disbursement
event costs

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

/ /

Transaction ID : VN7BA9WS9H2

Amount of Each Disbursement this Period

in-kind contribution see #VN8AJD7JGM3

Full Name (Last, First, Middle Initial)

C. Greenberg Quinlan Rosner Research

Mailing Address 10 G St NE
Ste 50

City Washington State DC Zip Code 20002-4213

Purpose of Disbursement
Research Focus Groups

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

005
Category/
Type

Date of Disbursement

/ /

Transaction ID : VN7BA9W4KP8

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Every Voice Action

Full Name (Last, First, Middle Initial)

A. Harmon, Curran, Speilberg + Eisenberg LLP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

Mailing Address 1726 M St NW
Ste 600

Transaction ID : VN7BA9W4KQ5

City Washington State DC Zip Code 20036-4523

Amount of Each Disbursement this Period

Purpose of Disbursement
Legal Fees

001
Category/ Type

151.20

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Judy Maslen

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

Mailing Address 128 Augusta National Dr

Transaction ID : VN7BA9W2PV8

City Yarmouth Port State MA Zip Code 02675-1602

Amount of Each Disbursement this Period

Purpose of Disbursement
Accounting Consulting

Category/ Type

877.25

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

Amount of Each Disbursement this Period

City State Zip Code

Purpose of Disbursement

Category/ Type

--

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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

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

1028.45

157763.71

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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

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NAME OF COMMITTEE (In Full)

Every Voice Action

Full Name (Last, First, Middle Initial)

A. Luis Navarro

Mailing Address 19121 Treadway Rd

City State Zip Code
Brookeville MD 20833-2736

Purpose of Disbursement
Consulting

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : VN7BA9WRZY3

Amount of Each Disbursement this Period

pd by Every Voice as an in-kind contribution see VN8AJD9GMQ4

Full Name (Last, First, Middle Initial)

B. Anthony Whittaker

Mailing Address 1020 Fairmont St NW
Apt 9

City State Zip Code
Washington DC 20001-3948

Purpose of Disbursement
analysis & targeting services

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : VN7BA9WS0A8

Amount of Each Disbursement this Period

paid by Every Voice-as an in-kind contribution see VN8AJD9G6V5

Full Name (Last, First, Middle Initial)

C. Luis Navarro

Mailing Address 19121 Treadway Rd

City State Zip Code
Brookeville MD 20833-2736

Purpose of Disbursement
Consulting

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : VN7BA9WRZZ1

Amount of Each Disbursement this Period

pd by Every Voice as an in-kind contribution see VN8AJD9GMW4

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

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

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

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

FOR LINE NUMBER:
(check only one)

<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

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NAME OF COMMITTEE (In Full)
Every Voice Action

Full Name (Last, First, Middle Initial)

A. HOUSE MAJORITY PAC

Mailing Address 700 13th St NW
Ste 600

City Washington State DC Zip Code 20005-3960

Purpose of Disbursement
*In-kind: Public Opinion Research

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2014

Transaction ID : VN8AJD68XF11

Amount of Each Disbursement this Period

4760.75

* In-Kind Received

Full Name (Last, First, Middle Initial)

B. We Are Kentucky

Mailing Address 127 W Main St

City Lexington State KY Zip Code 40507-1320

Purpose of Disbursement
Contribution

Candidate Name

We Are Kentucky

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : VN7BA9VQC07

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

C. HOUSE MAJORITY PAC

Mailing Address 700 13th St NW
Ste 600

City Washington State DC Zip Code 20005-3960

Purpose of Disbursement
*In-kind: Public Opinion Research

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2014

Transaction ID : VN8AJD8C4K5I

Amount of Each Disbursement this Period

6666.67

* In-Kind Received

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

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

111427.42

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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

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NAME OF COMMITTEE (In Full)
Every Voice Action

Full Name (Last, First, Middle Initial)

A. Anthony Whittaker

Mailing Address 1020 Fairmont St NW
Apt 9

City Washington State DC Zip Code 20001-3948

Purpose of Disbursement
analysis & targeting services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

001

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2014

Transaction ID : VN7BA9WS0B6

Amount of Each Disbursement this Period

6000.00

paid by Every Voice-as an in-kind contribution see VN8AJD9GPY2

Full Name (Last, First, Middle Initial)

B. Working America

Mailing Address 815 16th St NW

City Washington State DC Zip Code 20006-4101

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

012

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2014

Transaction ID : VN7BA9W0HN4

Amount of Each Disbursement this Period

75000.00

Full Name (Last, First, Middle Initial)

C. Every Voice

Mailing Address 1133 19th St NW
FI 9

City Washington State DC Zip Code 20036-3612

Purpose of Disbursement
in-kind staff time & associated overhead

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2014

Transaction ID : VN8AJD9FDX7I

Amount of Each Disbursement this Period

46786.00

* In-Kind Received

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

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

127786.00

275697.29

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Every Voice Action
FEC IDENTIFICATION NUMBER
C C00566208
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Eichenbaum and Associates
Mailing Address
219 N Milwaukee St
City
Milwaukee State
WI Zip Code
53202-5818
Date of Public Distribution/Dissemination
07 / 29 / 2014
Amount
124728.00
Transaction ID : VN7BA9TGS81
Date of Disbursement or Obligation
07 / 24 / 2014
Purpose of Expenditure
Advertising Category/Type
004
Name of Federal Candidate
MICHAEL RICHARD POMPEO
Support Oppose
Office Sought: House District: 04
President Senate State: KS
Calendar Year-To-Date
Per Election for Office Sought
124728.00
Disbursement For: Primary General
2014 Other (specify)

Full Name of Payee
New Partners Consulting
Mailing Address
1250 I St NW
Ste 200
City
Washington State
DC Zip Code
20005-5994
Date of Public Distribution/Dissemination
09 / 08 / 2014
Amount
30000.00
Transaction ID : VN7BA9VAA27
Date of Disbursement or Obligation
08 / 18 / 2014
Purpose of Expenditure
Digital Consulting Category/Type
004
Name of Federal Candidate
Mitch McConnell
Support Oppose
Office Sought: House District:
President Senate State: KY
Calendar Year-To-Date
Per Election for Office Sought
110833.00
Disbursement For: Primary General
2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 154728.00
(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.

Signature David Donnelly [Electronically Filed] Date 10 / 15 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Every Voice Action	FEC IDENTIFICATION NUMBER ▼ C C00566208
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 of Payee Associated Press	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 08 / 2014
Mailing Address 450 W 33rd St	Amount 6300.00
City State Zip Code New York NY 10001-2603	Transaction ID : VN7BA9VA9R8 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 05 / 2014
Purpose of Expenditure Photos for Advertising	Category/Type 004
Name of Federal Candidate Mitch McConnell	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KY</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____
110833.00	

Full Name of Payee New Partners Consulting	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 08 / 2014
Mailing Address 1250 I St NW Ste 200	Amount 39133.00
City State Zip Code Washington DC 20005-5994	Transaction ID : VN7BA9V97N2 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 05 / 2014
Purpose of Expenditure Advertising	Category/Type 004
Name of Federal Candidate Mitch McConnell	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KY</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____
110833.00	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	45433.00
(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.

David Donnelly [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
10 / 15 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Every Voice Action		FEC IDENTIFICATION NUMBER C C00566208
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee Every Voice	
Mailing Address 1133 19th St NW FI 9	
City Washington	State DC
Zip Code 20036-3612	
Purpose of Expenditure Social Media Advertisement Costs	Category/ Type 004
Name of Federal Candidate Mitch McConnell	
<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 110833.00	

Date of Public Distribution/Dissemination 09 / 08 / 2014
Amount 400.00
Transaction ID : VN7BA9VBF82
Date of Disbursement or Obligation 09 / 08 / 2014
Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee New Partners Consulting pd by Every Voice as in inkind contribution see VN8AJD31SJ3	
Mailing Address 1250 I St NW Ste 200	
City Washington	State DC
Zip Code 20005-5994	
Purpose of Expenditure Web Design	Category/ Type 004
Name of Federal Candidate Mitch McConnell	
<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 110833.00	

Date of Public Distribution/Dissemination 09 / 08 / 2014
Amount 35000.00
Transaction ID : VN7BA9VA4Z1
Date of Disbursement or Obligation 09 / 08 / 2014
Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	35400.00
(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.

David Donnelly

[Electronically Filed]

Date 10 / 15 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Every Voice Action	FEC IDENTIFICATION NUMBER ▼ C C00566208
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 of Payee Buying Time	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 18 / 2014
Mailing Address 650 Massachusetts Ave NW Ste 210	Amount 200131.00
City Washington State DC Zip Code 20001-3728	Transaction ID : VN7BA9VK839 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 16 / 2014
Purpose of Expenditure Advertising Category/Type 004	Name of Federal Candidate Mike Rounds <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: SD
Calendar Year-To-Date Per Election for Office Sought 211391.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Murphy Vogel Askew Reilly LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 18 / 2014
Mailing Address 1199 N Fairfax St Ste 220	Amount 10260.00
City Alexandria State VA Zip Code 22314-1437	Transaction ID : VN7BA9VK7S0 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 16 / 2014
Purpose of Expenditure Advertising Category/Type 004	Name of Federal Candidate Mike Rounds <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: SD
Calendar Year-To-Date Per Election for Office Sought 211391.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	210391.00
(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.

David Donnelly [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
10 / 15 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Every Voice Action	FEC IDENTIFICATION NUMBER ▼ C C00566208
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 of Payee Every Voice	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 18 / 2014
Mailing Address 1133 19th St NW FI 9	Amount 1000.00
City State Zip Code Washington DC 20036-3612	Transaction ID : VN7BA9VP3B6 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 18 / 2014
Purpose of Expenditure Social Media Advertisement Costs	Category/Type 004
Name of Federal Candidate Mike Rounds	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: SD
Calendar Year-To-Date Per Election for Office Sought 211391.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address	Amount
City State Zip Code	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure	Category/Type
Name of Federal Candidate	<input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	446952.00

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.

David Donnelly
Signature

[Electronically Filed] Date M M / D D / Y Y Y Y Y Y
10 / 15 / 2014