

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.
YG ACTION FUND

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 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 / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

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 JOHN MURRAY

Signature of Treasurer JOHN MURRAY [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

YG ACTION FUND

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="2012"/> | <input type="text" value="158837.40"/> | <input type="text" value="158837.40"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="76231.85"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="5339150.00"/> | <input type="text" value="5394150.00"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="5415381.85"/> | <input type="text" value="5552987.40"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="725479.15"/> | <input type="text" value="863084.70"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="4689902.70"/> | <input type="text" value="4689902.70"/> |
| 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

Write or Type Committee Name

YG ACTION FUND

Report Covering the Period: From: 04 / 01 / 2012 To: 06 / 30 / 2012

| 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)..... | 5277400.00 | 5302400.00 |
| (ii) Unitemized | 0.00 | 0.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 5277400.00 | 5302400.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 61000.00 | 91000.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 5338400.00 | 5393400.00 |
| 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)..... | 750.00 | 750.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶ | 5339150.00 | 5394150.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 5339150.00 | 5394150.00 |

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 | 269004.15 | 354609.70 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 269004.15 | 354609.70 |
| 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) | 456475.00 | 508475.00 |
| 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 | 0.00 | 0.00 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 725479.15 | 863084.70 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 725479.15 | 863084.70 |

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) | 5338400.00 | 5393400.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 5338400.00 | 5393400.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 269004.15 | 354609.70 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 750.00 | 750.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 268254.15 | 353859.70 |

**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 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
YG ACTION FUND

A. Dr. MIRIAM ADELSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3355 LAS VEGAS BLVD SOUTH
 City LAS VEGAS State NV Zip Code 89109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ADELSON CLINIC Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500000.00

Date of Receipt 04 / 30 / 2012
Transaction ID : SA11AI.4415
 Amount of Each Receipt this Period 2500000.00
 CONTRIBUTION

B. SHELDON ADELSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3355 LAS VEGAS BLVD SOUTH
 City LAS VEGAS State NV Zip Code 89109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LAS VEGAS SANDS CORPORATION Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500000.00

Date of Receipt 04 / 30 / 2012
Transaction ID : SA11AI.4366
 Amount of Each Receipt this Period 2500000.00
 CONTRIBUTION

C. AMERICAN WELL CORP.
 Full Name (Last, First, Middle Initial)
 Mailing Address 75 STATE ST., FL. 26
 City BOSTON State MA Zip Code 02109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 03 / 2012
Transaction ID : SA11AI.4371
 Amount of Each Receipt this Period 5000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5005000.00
TOTAL This Period (last page this line number only)..... ▶

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 30 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
YG ACTION FUND

| | | |
|---|--------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. NEIL BENDER II | | Date of Receipt MM / DD / YYYY 05 / 16 / 2012 Transaction ID : SA11AI.4379 |
| Mailing Address 119 ISLAND BRIDGE WAY | | Amount of Each Receipt this Period 20000.00 |
| City WILMINGTON | State NC | Zip Code 28412 |
| FEC ID number of contributing federal political committee. C | CONTRIBUTION | |
| Name of Employer VELOCITY SOLUTIONS | Occupation FOUNDER/DIRECTOR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 20000.00 | |

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. JOSEPH P GAVAGHAN | | Date of Receipt MM / DD / YYYY 05 / 07 / 2012 Transaction ID : SA11AI.4373 |
| Mailing Address 2530 GLENWOOD AVE | | Amount of Each Receipt this Period 2400.00 |
| City RALEIGH | State NC | Zip Code 27608 |
| FEC ID number of contributing federal political committee. C | CONTRIBUTION | |
| Name of Employer KEYSTONE CORPORATION | Occupation PRESIDENT & CEO | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2400.00 | |

| | | |
|---|---------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. BRUCE KOVNER | | Date of Receipt MM / DD / YYYY 06 / 21 / 2012 Transaction ID : SA11AI.4384 |
| Mailing Address 500 PARK AVENUE 11TH FLOOR | | Amount of Each Receipt this Period 125000.00 |
| City NEW YORK | State NY | Zip Code 10022 |
| FEC ID number of contributing federal political committee. C | CONTRIBUTION | |
| Name of Employer CAXTON ALTERNATIVE MANAGEMENT | Occupation FINANCIAL EXECUTIVE | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 125000.00 | |

| | |
|--|-----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 147400.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER: PAGE 8 OF 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
YG ACTION FUND

A. SUZANNE F KOVNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 500 PARK AVENUE
 11TH FLOOR
 City NEW YORK State NY Zip Code 10022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 125000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2012
Transaction ID : SA11AI.4389
 Amount of Each Receipt this Period
 125000.00
CONTRIBUTION

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).....▶ | 125000.00 |
| TOTAL This Period (last page this line number only).....▶ | 5277400.00 |

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

| | | | |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 9 OF 30 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" 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 |

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NAME OF COMMITTEE (In Full)
YG ACTION FUND

A. AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1891 PRESTON WHITE DRIVE
 City RESTON State VA Zip Code 20191
 FEC ID number of contributing federal political committee. **C** C00343459
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 05 / 23 / 2012
Transaction ID : SA11C.4381
 Amount of Each Receipt this Period 5000.00
 CONTRIBUTION

B. ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 11921 FREEDOM DRIVE SUITE 1100
 City RESTON State VA Zip Code 20190
 FEC ID number of contributing federal political committee. **C** C00447565
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 09 / 2012
Transaction ID : SA11C.4382
 Amount of Each Receipt this Period 5000.00
 CONTRIBUTION

C. EYE OF THE TIGER PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 2485
 City SPRINGFIELD State VA Zip Code 22152
 FEC ID number of contributing federal political committee. **C** C00467431
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 08 / 2012
Transaction ID : SA11C.4377
 Amount of Each Receipt this Period 1000.00
 CONTRIBUTION

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 11000.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER: PAGE 10 OF 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
YG ACTION FUND

A. HOUSE CONSERVATIVES FUND
 Full Name (Last, First, Middle Initial)
 Mailing Address 228 S. WASHINGTON ST., STE. 115
 City State Zip Code
 ALEXANDRIA VA 22314
 FEC ID number of contributing federal political committee. **C** C00326439
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 50000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 23 / 2012
Transaction ID : SA11C.4364
 Amount of Each Receipt this Period
 50000.00
CONTRIBUTION

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).....▶ | 50000.00 |
| TOTAL This Period (last page this line number only).....▶ | 61000.00 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 30
(check only one)

| | | | | | | | | |
|------------------------------|------------------------------|---|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" 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 |
|------------------------------|------------------------------|---|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
YG ACTION FUND

A. BLT STEAK

Full Name (Last, First, Middle Initial)
Mailing Address 1625 I STREET NW

City WASHINGTON State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 06 / 2012

Transaction ID : SA15.4394

Amount of Each Receipt this Period
750.00

FUNDRAISING ROOM RENTAL REFUND

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).....▶ | 750.00 |
| TOTAL This Period (last page this line number only).....▶ | 750.00 |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YG ACTION FUND

Full Name (Last, First, Middle Initial)

A. AT&T MOBILITY

Mailing Address PO BOX 536216

City ATLANTA State GA Zip Code 30353-6216

Purpose of Disbursement
PHONE EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2012

Transaction ID : SB21B.4311

Amount of Each Disbursement this Period

164.13

Full Name (Last, First, Middle Initial)

B. AT&T MOBILITY

Mailing Address PO BOX 536216

City ATLANTA State GA Zip Code 30353-6216

Purpose of Disbursement
PHONE EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 28 / 2012

Transaction ID : SB21B.4338

Amount of Each Disbursement this Period

174.51

Full Name (Last, First, Middle Initial)

C. NICK BOUKNIGHT

Mailing Address 6004 LOWELL AVENUE

City ALEXANDRIA State VA Zip Code 22312

Purpose of Disbursement
OFFICE EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 24 / 2012

Transaction ID : SB21B.4324

Amount of Each Disbursement this Period

19.99

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

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

358.63

**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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)

A. NICK BOUKNIGHT

Mailing Address 6004 LOWELL AVENUE

City ALEXANDRIA State VA Zip Code 22312

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2012

Transaction ID : SB21B.4328

Amount of Each Disbursement this Period

2186.89

Full Name (Last, First, Middle Initial)

B. NICK BOUKNIGHT

Mailing Address 6004 LOWELL AVENUE

City ALEXANDRIA State VA Zip Code 22312

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2012

Transaction ID : SB21B.4345

Amount of Each Disbursement this Period

2186.89

Full Name (Last, First, Middle Initial)

C. NICK BOUKNIGHT

Mailing Address 6004 LOWELL AVENUE

City ALEXANDRIA State VA Zip Code 22312

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 04 / 2012

Transaction ID : SB21B.4352

Amount of Each Disbursement this Period

31.68

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

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

4405.46

**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)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)

A. NICK BOUKNIGHT

Mailing Address 6004 LOWELL AVENUE

City ALEXANDRIA State VA Zip Code 22312

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2012

Transaction ID : SB21B.4362

Amount of Each Disbursement this Period

3675.08

Full Name (Last, First, Middle Initial)

B. CREATIVE DIRECT LLC

Mailing Address 25 E. MAIN ST

City RICHMOND State VA Zip Code 23219

Purpose of Disbursement
POLLING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 25 / 2012

Transaction ID : SB21B.4359

Amount of Each Disbursement this Period

2150.00

Full Name (Last, First, Middle Initial)

C. BRAD DAYSRING

Mailing Address 4063 SOUTH FOUR MILE RUN DRIVE
#403

City ARLINGTON State VA Zip Code 22204

Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2012

Transaction ID : SB21B.4350

Amount of Each Disbursement this Period

5000.00

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

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

10825.08

**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)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)

A. BRAD DAYSRING

Mailing Address 4063 SOUTH FOUR MILE RUN DRIVE
#403

City ARLINGTON State VA Zip Code 22204

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2012

Transaction ID : **SB21B.4363**

Amount of Each Disbursement this Period

3758.71

Category/
Type

Full Name (Last, First, Middle Initial)

B. GRAND SLAM FINANCE

Mailing Address 13805 RESEARCH BLVD
SUITE 125

City AUSTIN State TX Zip Code 78750

Purpose of Disbursement
ACCOUNTING SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2012

Transaction ID : **SB21B.4313**

Amount of Each Disbursement this Period

4050.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. GRAND SLAM FINANCE

Mailing Address 13805 RESEARCH BLVD
SUITE 125

City AUSTIN State TX Zip Code 78750

Purpose of Disbursement
ACCOUNTING SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2012

Transaction ID : **SB21B.4336**

Amount of Each Disbursement this Period

8850.00

Category/
Type

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

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

16658.71

**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)

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| <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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)

A. GRAND SLAM FINANCE

Mailing Address 13805 RESEARCH BLVD
SUITE 125

City AUSTIN State TX Zip Code 78750

Purpose of Disbursement
ACCOUNTING SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 04 / 2012

Transaction ID : **SB21B.4353**

Amount of Each Disbursement this Period

5850.00

Full Name (Last, First, Middle Initial)

B. IPAYMENT, INC.

Mailing Address PO BOX 3429

City THOUSAND OAKS State CA Zip Code 91359

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2012

Transaction ID : **SB21B.4354**

Amount of Each Disbursement this Period

179.88

Full Name (Last, First, Middle Initial)

C. IRS

Mailing Address PO BOX 105083

City ATLANTA State GA Zip Code 30348

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2012

Transaction ID : **SB21B.4317**

Amount of Each Disbursement this Period

3822.49

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

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

9852.37

**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)

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| <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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)

A. IRS

Mailing Address PO BOX 105083

City ATLANTA State GA Zip Code 30348

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 09 / 2012

Transaction ID : SB21B.4320

Amount of Each Disbursement this Period

42.00

Full Name (Last, First, Middle Initial)

B. IRS

Mailing Address PO BOX 105083

City ATLANTA State GA Zip Code 30348

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 02 / 2012

Transaction ID : SB21B.4332

Amount of Each Disbursement this Period

3822.49

Full Name (Last, First, Middle Initial)

C. IRS

Mailing Address PO BOX 105083

City ATLANTA State GA Zip Code 30348

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 31 / 2012

Transaction ID : SB21B.4347

Amount of Each Disbursement this Period

3822.49

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

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

7686.98

**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)

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| <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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)

A. MCKENNA & ASSOCIATES LLC

Mailing Address 2321 N. KENTUCKY STREET

City ARLINGTON State VA Zip Code 22205

Purpose of Disbursement
POL/FUND/STRATEGIC CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2012

Transaction ID : SB21B.4330

Amount of Each Disbursement this Period

135000.00

Full Name (Last, First, Middle Initial)

B. JOHN MURRAY

Mailing Address 1556 21ST CT N

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SB21B.4327

Amount of Each Disbursement this Period

7644.36

Full Name (Last, First, Middle Initial)

C. JOHN MURRAY

Mailing Address 1556 21ST CT N

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2012

Transaction ID : SB21B.4344

Amount of Each Disbursement this Period

7644.36

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

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

150288.72

**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)

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| <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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)

A. JOHN MURRAY

Mailing Address 1556 21ST CT N

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06 | | 04 | | 2012 |

Transaction ID : SB21B.4351

Amount of Each Disbursement this Period

| |
|---------|
| 1166.56 |
|---------|

Full Name (Last, First, Middle Initial)

B. W HOTEL

Mailing Address 930 HILGARD AVE

City LOS ANGELES State CA Zip Code 90024

Purpose of Disbursement
LODGING EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 04 | | 30 | | 2012 |

Transaction ID : SB21B.4351.3

Amount of Each Disbursement this Period

| |
|--------|
| 400.59 |
|--------|

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AMTRAK

Mailing Address 4300 GARDEN CITY DR

City HYATTSVILLE State MD Zip Code 20785

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05 | | 11 | | 2012 |

Transaction ID : SB21B.4351.5

Amount of Each Disbursement this Period

| |
|--------|
| 436.00 |
|--------|

[MEMO ITEM]

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

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

| |
|---------|
| 1166.56 |
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)

A. JOHN MURRAY

Mailing Address 1556 21ST CT N

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2012

Transaction ID : **SB21B.4361**

Amount of Each Disbursement this Period

7644.36

Full Name (Last, First, Middle Initial)

B. RED RIVER LLC

Mailing Address 3140 W. WARD ROAD
SUITE 201

City DUNKIRK State MD Zip Code 20754

Purpose of Disbursement
FUNDRAISING/EVENT PLANNING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 28 / 2012

Transaction ID : **SB21B.4343**

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

C. REGUS MANAGEMENT GROUP, LLC

Mailing Address ATTN: KATHIE SHAFFER
211 N. UNION ST, SUITE 100

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
OFFICE RENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2012

Transaction ID : **SB21B.4310**

Amount of Each Disbursement this Period

149.00

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

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

22793.36

**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)

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| <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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)

A. REGUS MANAGEMENT GROUP, LLC

Mailing Address **ATTN: KATHIE SHAFFER**
211 N. UNION ST, SUITE 100

City **ALEXANDRIA** State **VA** Zip Code **22314**

Purpose of Disbursement
OFFICE RENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 04 | / | 30 | / | 2012 |

Transaction ID : SB21B.4326

Amount of Each Disbursement this Period

| |
|--------|
| 149.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. REGUS MANAGEMENT GROUP, LLC

Mailing Address **ATTN: KATHIE SHAFFER**
211 N. UNION ST, SUITE 100

City **ALEXANDRIA** State **VA** Zip Code **22314**

Purpose of Disbursement
OFFICE RENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06 | / | 01 | / | 2012 |

Transaction ID : SB21B.4348

Amount of Each Disbursement this Period

| |
|--------|
| 149.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. THE JEFFERSON

Mailing Address **101W. FRANKLIN STREET**

City **RICHMOND** State **VA** Zip Code **23220**

Purpose of Disbursement
FUNDRAISING EVENT VENUE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 04 | / | 18 | / | 2012 |

Transaction ID : SB21B.4323

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

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

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

| |
|--------|
| 798.00 |
|--------|

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

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

FOR LINE NUMBER:
(check only one)

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| <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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)

A. THE JEFFERSON

Mailing Address 101W. FRANKLIN STREET

City RICHMOND State VA Zip Code 23220

Purpose of Disbursement
FUNDRAISING EVENT CATERING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2012

Transaction ID : SB21B.4335

Amount of Each Disbursement this Period

863.40

Full Name (Last, First, Middle Initial)

B. VIRGINIA DEPT OF TAXATION

Mailing Address PO BOX 1115

City RICHMOND State VA Zip Code 23218

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2012

Transaction ID : SB21B.4316

Amount of Each Disbursement this Period

699.24

Full Name (Last, First, Middle Initial)

C. VIRGINIA DEPT OF TAXATION

Mailing Address PO BOX 1115

City RICHMOND State VA Zip Code 23218

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2012

Transaction ID : SB21B.4319

Amount of Each Disbursement this Period

10.00

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

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

1572.64

**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)

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| <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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)

A. VIRGINIA DEPT OF TAXATION

Mailing Address PO BOX 1115

City RICHMOND State VA Zip Code 23218

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2012

Transaction ID : SB21B.4331

Amount of Each Disbursement this Period

699.24

Category/
Type

Full Name (Last, First, Middle Initial)

B. VIRGINIA DEPT OF TAXATION

Mailing Address PO BOX 1115

City RICHMOND State VA Zip Code 23218

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2012

Transaction ID : SB21B.4346

Amount of Each Disbursement this Period

699.24

Category/
Type

Full Name (Last, First, Middle Initial)

C. WELLS FARGO

Mailing Address 111 CONGRESS AVE
11TH FLOOR

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 11 / 2012

Transaction ID : SB21B.4321

Amount of Each Disbursement this Period

61.78

Category/
Type

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

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

1460.26

**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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)

A. WELLS FARGO

Mailing Address 111 CONGRESS AVE
11TH FLOOR

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2012

Transaction ID : SB21B.4337

Amount of Each Disbursement this Period

107.80

Full Name (Last, First, Middle Initial)

B. WILEY REIN LLP

Mailing Address 1776 K STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2012

Transaction ID : SB21B.4312

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

C. WILEY REIN LLP

Mailing Address 1776 K STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 11 / 2012

Transaction ID : SB21B.4356

Amount of Each Disbursement this Period

20025.00

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

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

30132.80

**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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)

A. WILEY REIN LLP

Mailing Address 1776 K STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.4357**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. YUMA

Mailing Address PO BOX 152075

City TAMPA State FL Zip Code 33684

Purpose of Disbursement
COMPUTER SUPPORT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.4325**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. YUMA

Mailing Address PO BOX 152075

City TAMPA State FL Zip Code 33684

Purpose of Disbursement
COMPUTER SUPPORT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.4339**

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)
YG ACTION FUND

Full Name (Last, First, Middle Initial)
A. YUMA

Mailing Address PO BOX 152075

City TAMPA State FL Zip Code 33684

Purpose of Disbursement
COMPUTER SUPPORT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 25 / 2012

Transaction ID : **SB21B.4360**

Amount of Each Disbursement this Period
216.67

Category/Type

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 216.67

TOTAL This Period (last page this line number only)..... ▶ 268841.25

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) YG ACTION FUND | FEC IDENTIFICATION NUMBER ▼ C C00504761 |
| 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 CREATIVE DIRECT LLC | | Date M M / D D / Y Y Y Y 04 / 24 / 2012 |
| Mailing Address 25 E. MAIN ST | | Amount 22750.00 |
| City RICHMOND | State VA | Zip Code 23219 |
| Purpose of Expenditure MAILER | Category/Type 004 | Transaction ID : SE.4272 |
| Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD LANE HUDSON Jr. | | Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President |
| Calendar Year-To-Date Per Election for Office Sought 22750.00 | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) of Payee CREATIVE DIRECT LLC | | Date M M / D D / Y Y Y Y 06 / 29 / 2012 |
| Mailing Address 25 E. MAIN ST | | Amount 22750.00 |
| City RICHMOND | State VA | Zip Code 23219 |
| Purpose of Expenditure MAILER | Category/Type 004 | Transaction ID : SE.4291 |
| Name of Federal Candidate Supported or Opposed by Expenditure: SCOTT KEADLE | | Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President |
| Calendar Year-To-Date Per Election for Office Sought 22750.00 | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Runoff |

| | |
|--|--|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 45500.00 |
| (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.

JOHN MURRAY

Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y
07 / 15 / 2012

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

Form/Schedule: SE

Transaction ID : SE.4272

DISSEMINATION DATE OF INDEPENDENT EXPENDITURE IS 4/25/2012

Form/Schedule: SE

Transaction ID: SE.4291

DISSEMINATION DATE OF INDEPENDENT EXPENDITURE IS 7/2/12

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) YG ACTION FUND | FEC IDENTIFICATION NUMBER ▼ C C00504761 |
| 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
NATIONAL MEDIA RESEARCH, PLANNING & PLACEMENT LLC

Date
M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2012

Mailing Address **815 SLATERS LANE**

Amount
53000.00

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID : SE.4285

Purpose of Expenditure
MEDIA PLACEMENT AND PRODUCTION

Category/Type
004

Office Sought: House State: **NC**
 Senate District: **08**
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
RICHARD LANE HUDSON Jr.

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
75750.00

Disbursement For: Primary General
 Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee
NATIONAL MEDIA RESEARCH, PLANNING & PLACEMENT LLC

Date
M M M / D D D / Y Y Y Y Y Y
06 / 29 / 2012

Mailing Address **815 SLATERS LANE**

Amount
357975.00

City State Zip Code
ALEXANDRIA VA 22314

Transaction ID : SE.4302

Purpose of Expenditure
TV/RADIO PLACEMENT & PRODUCTION

Category/Type
004

Office Sought: House State: **NC**
 Senate District: **08**
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
SCOTT KEADLE

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
380725.00

Disbursement For: Primary General
 Other (specify) ▶ **Runoff**

| | |
|---|------------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 410975.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures..... ▶ | |
| (c) TOTAL Independent Expenditures..... ▶ | 456475.00 |

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.

JOHN MURRAY

[Electronically Filed]

Date **07 / 15 / 2012**

Signature

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

Form/Schedule: SE

Transaction ID : SE.4302

DISSEMINATION DATE OF INDEPENDENT EXPENDITURE IS 7/9/12

Form/Schedule:

Transaction ID: